

# Policy booklet

in plain English



For Agria Lifetime  
and Lifetime Plus  
Rabbit Insurance Customers

[www.agriapet.co.uk](http://www.agriapet.co.uk)

# Please keep this booklet safe

This policy booklet, in conjunction with your Schedule of Insurance, contain full details of your policy, please keep them in a safe place so that you can refer to them if you need to make a claim.

## In the event of a claim

Visit: [www.agriapet.co.uk/pet-owners/how-to-make-a-claim/](http://www.agriapet.co.uk/pet-owners/how-to-make-a-claim/)

or see the "How to Claim" section on page 12.

## To discuss your policy

UK: **03330 30 83 98**

Outside UK: **+44 (0) 1296 319248**

## Useful websites

**The Animal Behaviour and Training Council** - [www.abtcouncil.org.uk](http://www.abtcouncil.org.uk)

For information about the council and details of organisations it governs.

**Rabbit Welfare Association and Fund (RWF)** - [www.rabbitwelfare.co.uk](http://www.rabbitwelfare.co.uk)

For information about the Association and rabbit welfare.

**All documentation is also available in large print, Braille or audio file, please contact us if you require any of these.**

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## KEY FEATURES, BENEFITS AND SIGNIFICANT EXCLUSIONS (See pages 4 - 15 for full details)

All policy sections have limits on the amount paid. Your Schedule of Insurance shows these amounts.

### Section 1 - Veterinary Fees

#### Features

Cover is provided for veterinary treatment your rabbit receives for an illness or injury, including:

- Complementary treatment up to the amount specified on your Schedule of Insurance.
- Treatment for teeth and gums up to the maximum benefit; provided your rabbit has had its annual check-up and had any veterinary treatment recommended carried out within three months of the check-up.
- 50% of the cost of a clinical diet up to £200.
- 50% of the cost of diagnostic examination by means of Magnetic Resonance Imaging (MRI), Nuclear Magnetic Resonance Imaging (NMRI) or Computed Axial Tomography (CT or CAT).
- Treatment for behavioural disorders up to £200.

#### Significant Exclusions

- The fixed and percentage amounts you pay towards the cost of treatment your rabbit receives for each illness or injury in each period of insurance.
- Illnesses and injuries that first showed signs before your policy started.
- Illnesses and injuries that happen again and are the same as illnesses and injuries your rabbit had before your policy started. These include disorders that your rabbit can have in different eyes, ears, knees, front and back legs and feet, knees, hips, shoulders and elbows. For example, cover for treatment of a ruptured cruciate ligament in the left leg is not available when your rabbit has had a ruptured cruciate ligament in the right leg before your policy started.
- Illnesses that show signs in the first 10 days after your policy started.
- Costs to prevent an illness or injury, routine examinations, routine tests, routine treatment for your rabbit's general wellbeing, tests to investigate the general health of your rabbit, vaccinations, spaying, castration, caesarean section, pregnancy or giving birth.
- Vet's administration costs and other charges a vet makes for things that do not directly involve the vet's expertise in treating an illness or injury.

### Section 2 - Advertising and Reward

#### Features

The cost of advertising to recover your rabbit if it is lost or stolen including the cost of a reward.

#### Significant Exclusions

- If your rabbit is lost or stolen in the first 10 days after your policy started.
- If you do not report your rabbit is missing to vets and rescue centres.

### Section 3 - Travel and Accommodation

#### Features

The cost of travel and accommodation expenses if your usual vet refers your rabbit to another vet.

#### Significant Exclusions

- Any amount unless the cost of treatment is covered under policy Section 1 Veterinary Fees.

### Section 4 - Death from Illness or Injury

#### Features

The purchase price of your rabbit if it dies or has to be put to sleep by a vet as a result of an illness or injury.

#### Significant Exclusions

- Any claim if your rabbit dies from an illness and is over the maximum age for this policy section shown on your Schedule of Insurance.
- Illnesses and injuries that first showed signs before your policy started.
- Illnesses and injuries that happen again and are the same as illnesses and injuries your rabbit had before your policy started.
- Illnesses that show signs in the first 10 days after your policy started.
- If your pet dies as a result of extremes of temperature from being left unattended in a motor vehicle.

### Section 5 - Boarding Fees or Daily Minding

#### Features

The cost to board your rabbit at a licensed premises or up to £5 a day for someone to look after your rabbit, if you or a member of your immediate family have to go into hospital for three or more days in a row.

#### Significant Exclusions

- Medical conditions that existed before your policy started.
- When a member of your family can look after your rabbit.
- If you go into a nursing home, are convalescing or in rehabilitation outside of a hospital.

### GENERAL SIGNIFICANT EXCLUSIONS

- Any rabbit under the age of eight weeks at the start of your policy.
- Any incident, illness, injury, death or other event occurring outside the UK.
- War, terrorism, revolution and similar events, nuclear and radioactive contamination.
- Illnesses that rabbits are usually vaccinated against if your rabbit has not been vaccinated.

### GENERAL SIGNIFICANT CONDITIONS

- The policy is an annual contract of insurance and you must pay the full annual premium.
- If you miss a payment we may make an administration charge.
- If your bank tells us they cannot make your payment we will try to collect it again.

## CONTRACT OF INSURANCE

This is an annual insurance contract and to obtain the full benefit of the contract **you** must pay the full annual premium either in one payment or monthly instalments. If **we** accept **your** application and premium and an **illness, injury, loss** or theft happens in the **period of insurance**, **we** will provide the cover explained in the following pages and on **your Schedule of Insurance**. The cover provided, unless explained otherwise, is based on **your** financial loss which is the amount of money the **illness, injury, loss** or theft has cost **you**. This **Policy Wording** and **your Schedule of Insurance** make up **your** contract of insurance. **You** will need to read both to fully understand what is and what is not covered.

## DEFINITIONS

Any word or expression that has a specific meaning is shown in bold and has the same meaning throughout this **policy**.

### Behavioural Disorder(s)

Any change to **your rabbit's** normal behaviour that is caused by a mental or emotional disorder.

### Behaviourist

A person certified in clinical animal behaviour and a member of an organisation governed by the Animal Behaviour and Training Council (ABTC), who is not a **vet**.

### Bilateral Disorder

Means any medical disorder that can affect parts of **your rabbit's** body that it has one of on each side of its body, including ears, eyes, knees, front and back legs and feet, cruciate ligaments, hips, shoulders and elbows.

### Clinical Diet

Food made by a pet food company for the purpose of a **vet** to prescribe to help with a specific **illness** or **injury**.

### Clinical Sign(s)

Changes to **your rabbit's** normal healthy state, its physical appearance, its bodily functions or behaviour.

### Complementary Treatment

Means:

- Physiotherapy (including Laser Therapy, Pulsed Magnetic Field Therapy and Shock Wave Therapy) carried out by a **vet** or a member of a veterinary practice supervised by a **vet**.
- Physiotherapy (including Laser Therapy, Pulsed Magnetic Field Therapy and Shock Wave Therapy), osteopathy, chiropractic treatment recommended by a **vet** and provided by a qualified animal physiotherapist, osteopath or chiropractor.
- Acupuncture carried out by a **vet**.
- Hydrotherapy recommended by a **vet** and provided by a member of a veterinary practice supervised by a **vet** or a qualified animal hydrotherapist who is a member of a **UK** registered professional pet physiotherapy or hydrotherapy organisation.
- Herbal medicine.
- Any consultation fee to administer any of the above.

## Cooling Off Period

The 14 days after:

- the date **your policy** first started; or,
- the date **you** received **your** first **policy** booklet and **Schedule of Insurance** after **your policy** first started; or,
- the renewal date of **your policy**.

## Fixed Excess

The amount specified on **your Schedule of Insurance**. This is the fixed amount **you** pay towards;

- **veterinary treatment**,
- behavioural therapy,
- **complementary treatment**, received during each **period of insurance**.

The fixed amount applies to:

- all episodes of an **illness** with the same diagnosis or **clinical signs**; and,
- each **injury**,

**your rabbit** receives **veterinary treatment** for in each **period of insurance**.

When **your rabbit** receives **veterinary treatment**, behavioural therapy or **complementary treatment** that carries on into the next **period of insurance** and any more **periods of insurance**, the fixed amount applies to the treatment and therapy **your rabbit** receives in each **period of insurance** and **you** must pay two or more **fixed excess**, one for each **period of insurance**.

## Illness

Any change to **your rabbit's** normal healthy state; sickness, disease, **bilateral disorder**, defects and abnormalities, including defects and abnormalities **your rabbit** was born with or which were passed on by its parents.

## Illness in the First 10 Days

- An **illness** or **behavioural disorder** that first showed **clinical signs** in the first 10 days after **your policy** started; or,
- an **illness** that is the same as, or has the same diagnosis or **clinical signs** as an **illness** or **clinical sign** **your rabbit** had in the first 10 days after **your policy** started; or,
- an **illness** that is caused by, relates to, or results from, an **illness** or **clinical sign** **your rabbit** had in the first 10 days after **your policy** started; even if the **illness** or **clinical sign(s)** appear or happen in, or on, different parts of **your rabbit's** body.

## Immediate Family('s)

**Your** husband, wife, civil partner, life partner, children or parents living with **you**.

## Injury

Physical damage or trauma caused by an accident.

## Insurer

Agria Försäkring which is the **UK** branch of Försäkringsaktiebolaget Agria (publ).

## Maximum Benefit

The amount shown in the Your Cover section of **your Schedule of Insurance** as the most **we** will pay under each **policy** section for each incident or **period of insurance**.

## Percentage Excess

The percentage shown on **your Schedule of Insurance**. This is the percentage that **you** must pay towards the cost of:

- **veterinary treatment**,
  - behavioural therapy,
  - **complementary treatment**,
- received during each **period of insurance**.

**We** calculate the percentage amount on the amount left after the **fixed excess** is deducted.

## Period of Insurance

The time **your policy** lasts, as specified on **your Schedule of Insurance**.

## Policy

**Your** policy booklet and **Schedule of Insurance** which make up **your** insurance contract.

## Pre-existing Illness or Injury

An **injury** that happened, or an **illness** or **behavioural disorder** that first showed **clinical signs** before **your policy** started; or, an **injury** or **illness** that is the same as, or has the same diagnosis or **clinical signs** as an **injury**, **illness** or **clinical sign your rabbit** had before **your policy** started; or, an **injury** or **illness** that is caused by, relates to, or results from, an **injury**, **illness** or **clinical sign your rabbit** had before **your policy** started; no matter where the **injury**, **illness** or **clinical sign(s)** are noticed or happen in, or on, **your rabbit's** body.

## Prosthesis

An artificial body part or implant, other than rods, screws and plates.

## Schedule of Insurance

The document showing **your** details and **your rabbit's** details, the cover **you** have chosen, the amount **you** pay towards a claim (the excess), the dates of **your policy**, and any specific conditions and/or exclusions applicable to **your policy** or **your rabbit**.

## UK

Means England, Northern Ireland, Scotland, Wales, the Channel Islands and the Isle of Man.

## Veterinary Treatment

Means any examinations, consultations, advice, tests, diagnostic tests or scans, prescribed medication, bandages, surgery, hospitalisation, nursing and care carried out by a **vet** or a member of a veterinary practice supervised by a **vet**.

## Vet(s)/Vets

A person registered with the Royal College of Veterinary Surgeons.

## We/Us/Our

Agria Pet Insurance Ltd acts as agents representing the **Insurer**.

## You/Your

The policyholder(s) named on **your Schedule of Insurance**.

## Your Rabbit(s)

The rabbit shown on **your Schedule of Insurance**.

## LAW APPLICABLE TO THIS POLICY

**Your policy** is governed by English Law unless **you** and **we** have agreed otherwise.

## RIGHTS OF THIRD PARTIES

**You** and **we** are the only parties to this insurance. No other person has any rights under the Contracts (Rights of Third Parties) Act 1999 to enforce any term of this insurance, but this does not affect any right or remedy of a third party which exists or is available apart from this Act.



## SECTION 1. VETERINARY FEES

### We will pay

The cost of:

**Veterinary treatment your rabbit** receives during the **period of insurance** for an **illness or injury**.

Including:

- 50% of the cost of a **clinical diet** up to £200 to treat the **illness or injury**, for each separate **illness or injury**.
- Up to the amount specified on **your Schedule of Insurance** for **complementary treatment** for each separate **illness or injury**.
- The cost of **veterinary treatment** for **your rabbit's** teeth and gums, provided:
  - **Your rabbit** has had its teeth and gums checked by a **vet** in the 12 months prior to the **illness** being noted and;
  - Any **veterinary treatment** recommended as a result of the check must have been carried out within three months of the recommendation.
- Up to 20 sessions of hydrotherapy for each separate **illness or injury**.
- 50% of the cost of diagnostic examination by means of Magnetic Resonance Imaging (MRI), Nuclear Magnetic Resonance Imaging (NMRI) or Computed Axial Tomography (CT or CAT).
- The cost to put **your rabbit** to sleep.
- Pheromone products used for up to 6 months as part of a structured programme to permanently change **your rabbit's** behaviour.
- Up to £200 towards the cost of behavioural therapy **your rabbit** receives from a **behaviourist** for a **behavioural disorder**.

The amounts for **clinical diet** and **complementary treatment**, which includes the cost of up to 20 hydrotherapy sessions, are all included in the **maximum benefit** for this **policy** section. **You** can only claim up to these amounts once, per **illness or injury**, during the whole time **your rabbit** is insured with **us**.

The Pheromone products and the limit for behavioural therapy are all included in the **maximum benefit** for this **policy** section and apply once for each **behavioural disorder** during the whole time **your rabbit** is insured with **us**.

### We will not pay

1. The **fixed excess** and **percentage excess** shown on **your Schedule of Insurance**.
2. Costs resulting from a **pre-existing illness or injury**.
3. Costs resulting from an **illness in the first 10 days of your policy** (this does not apply to the first 10 days of the second or subsequent consecutive **period of insurance**).
4. The cost of **veterinary treatment** received when the **policy** is not in force.
5. More than the **maximum benefit** for this **policy** section.
6. Costs for and resulting from:
  - Preventive **veterinary treatment**, including spaying to prevent false pregnancy.
  - **Veterinary treatment** or behavioural therapy **you** choose to have carried out that does not treat an **illness, injury or behavioural disorder**.
  - Post mortem examinations.
  - Routine examinations, routine tests, routine treatment for **your rabbit's** general wellbeing and tests to investigate the general health of **your rabbit**.
  - Routine castration and routine spaying, other than the costs of **veterinary treatment** for complications arising from these procedures.
  - Vaccinations, other than the costs of **veterinary treatment** for adverse reactions arising from the vaccinations.
  - Trimming, burring or rasping **your rabbit's** teeth, other than when performed solely as treatment for an **illness** of the teeth or gums.
  - Grooming and dematting including syringing and removing hair from ears when there is no infection present, nail clipping and removing dew claws that are not damaged.
  - Routine blood tests and urine tests.
  - Heart screening, blood or urine tests before a general anaesthetic or sedation if **your rabbit's** age, medical history, or **clinical signs** immediately before this is carried out do not suggest it has an identifiable and significant risk from the general anaesthetic or sedation.
  - False pregnancy if **your rabbit** has already received **veterinary treatment** for 2 or more episodes of false pregnancy.
  - Products for killing or controlling fleas, parasites and intestinal worms, other than the costs of **veterinary treatment** for adverse reactions to these products.
  - Products for killing or controlling skin mites unless there is evidence **your rabbit** has a mite infestation.
  - Collars used to restrict **your rabbit's** access to its body, or surgical T-shirts and protective boots, unless they are used to directly cover a wound.
  - Harnesses.
7. The cost of **veterinary treatment** for a second or any subsequent episode(s) of fly strike.
8. The cost of **clinical diets** and medicines to help **your rabbit** lose weight or any routine post-operative recovery diet.
9. The cost of any hydrotherapy session if it is performed to help **your rabbit** lose weight.
10. Any costs for **veterinary treatment** for or related to pregnancy, giving birth or breeding.
11. Any costs for **complementary treatment** and the treatment of **behavioural disorders** that are not recommended by a **vet** and are not carried out under the direction of a **vet**.
12. Any costs for:
  - Matrix Energy Field Therapy
  - Reiki massage



- Faith healing
  - Homeopathic medicine.
13. Costs for or resulting from:
    - Cosmetic dentistry.
    - Crowns.
    - Root canal treatment;
      - That is being undertaken for purely cosmetic reasons.
      - That is on teeth other than the molar teeth.
      - That doesn't offer clear advantages over tooth removal in terms of safety.
      - For badly damaged teeth.
      - Where there is severe periodontal disease and the molar teeth are very loose.
  14. Costs for or resulting from:
    - Platelet Rich Plasma therapies.
    - Organ transplants.
    - The cost of any **prosthesis**, including any **veterinary treatment** needed to fit the **prosthesis**.
    - Stem cell therapy.
    - Experimental **veterinary treatment**.
  15. Any costs for or relating to the production of a 3D printed model which is used for the planning of **your rabbit's** surgery.
  16. The cost of:
    - House calls unless **your vet** confirms that to move **your rabbit** would seriously endanger its health, or significantly worsen the condition.
    - **Your rabbit's** stay at a veterinary practice unless its **veterinary treatment** can only be given in a veterinary practice.
    - Bathing **your rabbit**, other than bathing with a medicated product that should only be administered by a **vet** or a member of a veterinary practice.
    - Transporting **your rabbit** to a veterinary practice, between veterinary practices and to move **your rabbit** within a veterinary practice.
    - **Your vet's** travel expenses.
    - House calls, moving, transporting, bathing, hospitalisation, boarding fees and travel expenses caused by or resulting from **your rabbit's** weight or **your** personal circumstances.
  17. The cost of any additional **veterinary treatment** required because **you** are unable to administer medication due to **your rabbit's** behaviour or **your** personal circumstances.
  18. The cost of prescribed medication purchased from an online retailer unless the online retailer is listed in the Veterinary Medicine Directorate's accredited internet retailer scheme.
  19. Costs to put **your rabbit** to sleep if:
    - A **vet** can treat it and it is humane to keep it alive.
    - It is put to sleep because it is aggressive unless an **illness** or **injury** covered by this **policy** section causes it to be aggressive.
  20. Any costs in respect of disposal, cremation or burial of **your rabbit**.
  21. The costs to:
    - Fill in and send a claim form.
    - Refer **your rabbit** to another veterinary practice.
    - Admit **your rabbit** to a veterinary practice.
 and the cost of:
    - Postage, packaging, importing medication and using a courier.
    - Obtaining urgent laboratory tests when **your rabbit** is not immediately at risk from a life-threatening **illness**.
  22. The cost of out of hours fees unless an **illness** or **injury**:
    - happens or shows the first **clinical signs**; or,
    - significantly deteriorates,
 after 6 pm and before 8 am, during a weekend or during a bank holiday.
  23. Additional fees for fitting **your rabbit** into the working schedule of a veterinary practice.
  24. **Vet's** administration costs and other charges a **vet** makes for things that do not directly involve the **vet's** expertise in treating an **illness** or **injury**.
  25. Portage fees charged by a **vet** to convey **your rabbit** whilst in their care.
  26. The cost of housing, including cages and bedding needed for the **veterinary treatment** or wellbeing of **your rabbit**.
  27. Any costs for or resulting from a disease, including Rabies that the Department for Environment, Food and Rural Affairs (DEFRA) require notification of.
  28. **Veterinary treatment, complementary treatment** and behavioural therapy received outside the **UK**.

## How to Claim

1. Please make sure that **you** comply with the "Claims Conditions" and "How to Claim" Conditions on pages 11 and 12.
2. Follow the instructions on the "Make A Claim" section of **our** website.
3. If it is more convenient, **your vet** agrees and **we** agree, **we** can make payments directly to **your vet**. **You** can ask **us** to do this when **you** make a claim.

- Unless **you** tell **us** to pay someone else **we** will always make payments to **you**. **You** can tell **us** who to pay when **you** make a claim.
- If **you** claim for medication bought on the internet, from a chemist or from a pharmacy **you** must provide a copy of the prescription from **your vet** and the purchase receipt.

## SECTION 2. ADVERTISING AND REWARD

This section only applies if it is shown in the Your Cover section of **your Schedule of Insurance**.

### We will pay

If **your rabbit** is lost or stolen during the **period of insurance** **we** will pay up to the **maximum benefit** for this **policy** section for **you** to advertise to recover **your rabbit** and up to £50 for the cost of a reward if **your rabbit** is recovered. The £50 cost of a reward is included in the **maximum benefit** for this **policy** section.

### We will not pay

- Any amount if **your rabbit** is lost or stolen before or in the 10 days after **your policy** started (this does not apply to the first 10 days of the second or subsequent consecutive **period of insurance**).
- Any amount if **you** employ a company or organisation to search for **your rabbit**, report **your rabbit** missing, provide a contact point or produce their branded advertising material for **you**.
- Any reward to **you** or anyone who:
  - Is a member of **your** family.
  - Lives with **you**.
  - Works for **you**.
  - Was looking after **your rabbit** at the time it was lost or stolen.
- Any amount for a reward if **you** do not have a receipt showing the full name and address of the person who found **your rabbit**.
- Any amount if **your rabbit** is taken by someone to obtain a ransom payment from **you**.
- Any amount if **you** do not report **your rabbit** is missing to local **vets** and rescue centres.

### How to Claim

- Please make sure that **you** comply with the "Claims Conditions" and "How to Claim" Conditions specified on pages 11 and 12.
- Send **us** the receipts for advertising costs and copies of all adverts.
- If **you** are claiming for a reward **you** have paid, **we** will also need:
  - An explanation of where and how **your rabbit** was found.
  - A receipt for the amount of the reward **you** paid with the full name and address of the person **you** paid it to.

## SECTION 3. TRAVEL AND ACCOMMODATION

This section only applies if it is shown in the Your Cover section of **your Schedule of Insurance**.

### We will pay

If **your rabbit** has an **illness** or **injury** during the **period of insurance** and **your** usual **vet** refers **your rabbit** to another **vet** for **veterinary treatment**. **We** will pay up to the **maximum benefit** for this **policy** section for:

- travel expenses of 25 pence a mile to and from the **vet** **your rabbit** is referred to;
- Toll road charges;
- standard ferry fees; and,
- accommodation expenses,

during the **period of insurance** for **you** or a member of **your immediate family**.

### We will not pay

Any amount:

- Unless the cost of **veterinary treatment** for the **illness** or **injury** is covered under "Section 1. Veterinary Fees".
- For travel:
  - To or from **your rabbit's** usual veterinary practice.
  - To, from or in between any practice or branch practice of a group of veterinary practices **your** usual veterinary practice belongs to.
  - From the **UK** to a veterinary practice in another country, or from a veterinary practice in another country to the **UK**.
- If the **veterinary treatment** the **vet** referred **your rabbit** for does not happen in the **period of insurance**.
- For travel to a **Behaviourist** or for **complementary treatment**.
- For food and drink.
- More than the amount **you** have paid for **your** travel and accommodation.

### How to Claim

- Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim' Conditions specified on pages 11 and 12.
- Send **us** a letter explaining the reasons for **your** travel and accommodation, where **you** travelled from and to, how many times **you** made the journey and how many days **you** stayed away from home. Send the letter to **us** with receipts for any travel and accommodation expenses.

## SECTION 4. DEATH FROM ILLNESS OR INJURY

This section only applies if it is shown in the Your Cover section of **your Schedule of Insurance**.

### We will pay

If **your rabbit** dies or is put to sleep by a **vet** during the **period of insurance** as a result of an **illness** that first shows **clinical signs** or **injury** that happens during the **period of insurance**:

- the amount **you** paid for **your rabbit**, up to the amount declared on **your Schedule of Insurance** up to the **maximum benefit** for this **policy** section; or,
- the purchase price shown on **your Schedule of Insurance**, up to a maximum of £30, if **you** do not have a purchase receipt.

### We will not pay

1. If **your rabbit** dies from an **illness** when it is over the maximum age shown on **your Schedule of Insurance**.
2. If **your rabbit** dies from a **pre-existing illness or injury**.
3. If **your rabbit** dies as a result of an **illness in the first 10 days of your policy** (this does not apply to the first 10 days of the second or subsequent consecutive **period of insurance**).
4. If **your rabbit** dies from or as a result of pregnancy or giving birth.
5. If a **vet** can treat **your rabbit** and it is humane to keep it alive.
6. If **your rabbit** is put to sleep because it is aggressive unless an **illness or injury** covered by this insurance caused the aggression.
7. If **your rabbit** dies as a result of extremes of temperature from being left unattended in a motor vehicle.

### How to Claim

Please make sure that **you** comply with the "Claims Conditions" and "How to Claim" Conditions specified on pages 11 and 12. Send **us** a letter explaining what **you** are claiming for along with the purchase receipt.

## SECTION 5. BOARDING FEES OR DAILY MINDING

This section only applies if it is shown in the Your Cover section of **your Schedule of Insurance**.

### We will pay

If **you**, or a member of **your immediate family** are ill or injured during the **period of insurance** and have to go into hospital.

**We will pay up to the maximum benefit** for this **policy** section for:

- the cost for **your rabbit** to stay at a licensed rabbit hotel; or,
- up to £5 a day for someone to look after **your rabbit**.

### We will not pay

Any amount:

1. If **you** or a member of **your immediate family** are in hospital for less than 3 days in a row.
2. As a result of **you**, or a member of **your immediate family's** pregnancy, drug abuse, alcoholism, attempted suicide, self-inflicted **injuries** or cosmetic surgery not as a result of being ill or injured.
3. If a member of **your immediate family** is available to look after **your rabbit**.
4. As a result of a medical condition that **you** or a member of **your immediate family** had before this **policy** started and was likely to result in a stay in hospital.
5. If **you** have to go into a nursing home, are convalescing outside of a hospital or involved in any form of rehabilitation outside of a hospital.

### How to Claim

1. Please make sure that **you** comply with the "Claims Conditions" and "How to Claim" Conditions specified on pages 11 and 12.
2. When **you** leave hospital, obtain a medical certificate stating the number of days in hospital and the medical condition and send **us your**:
  - Medical certificate.
  - Receipt from the rabbit hotel.

If **you** pay someone to look after **your rabbit**, a receipt with their full name and address to support **your** claim.

## TERRITORIAL LIMITS

This **policy** provides cover in the **UK**.

## GENERAL EXCLUSIONS

**We will not provide cover** under any **policy** section for, connected to or resulting from:

1. **Your rabbit** being less than eight weeks old, or **your rabbit** being aged five years old or older when **you** first took the **policy** out.
2. Anything that happens outside the Territorial Limits.
3. War, invasion, act of foreign enemies, civil war, rebellion, revolution, insurrection or military or usurped power.
4. Any act of force or violence, including:
  - biological, chemical and/or nuclear force or contamination, or;
  - the threat of biological, chemical and/or nuclear force or contamination, by anyone;
  - acting alone, or;
  - acting for any organisation(s) or government(s), or;

- connected with any organisation(s) or government(s), carried out;
  - for political, religious, ideological or similar reasons, or;
  - to influence any government(s), or;
  - to put any section of the public in fear.
5. Ionising radiations or contamination by radioactivity from:
    - any nuclear fuel.
    - any nuclear waste.
    - the combustion of nuclear fuel.
  6. The radioactive, toxic, explosive or other hazardous properties of any nuclear installation or part of any nuclear installation.
  7. **Your rabbit** if it is put to sleep following an order by a Government, local authority or any person who has the legal authority to make the order.
  8. A deliberate act by **you**, a member of **your** family, someone who works for **you**, someone who lives with **you**.
  9. A claim covered by any other insurance, unless the other insurance cover has been fully used.
  10. **You** not complying with the **UK** animal health and animal import legislation.
  11. If **your rabbit** was purchased from a vendor operating outside of the animal licensing requirements.
  12. When **you** are no longer the owner of **your rabbit** or **you** have loaned it to someone else.
  13. If **your rabbit** is used for breeding purposes.
  14. Cyber risks, including:
    - the use or misuse of the internet or similar facility;
    - any electronic transmission of data or other information;
    - any computer virus or similar problem.

## GENERAL CONDITIONS

If **you** do not comply with Conditions 1 to 3 (below) **your policy** will stop immediately or **we** may treat it as not being valid from when it started. If **your policy** stops **we** will write to **you** at the address shown on **your** latest **Schedule of Insurance** and tell **you** when it stopped.

1. **You** are aged 18 or over, live in the **UK** and are the owner of **your rabbit** and it lives with **you**. If **you** move from the address on **your Schedule of Insurance**, are no longer the owner or **your rabbit** does not live with **you** all the time, **you** must tell **us**. **You** accept that if **you** move address **your** premium may change from the date of the move.
2. When **you** arrange, change or renew this **policy** **you** must answer any questions **we** ask, honestly and to the best of **your** knowledge. If **your policy** is in joint names both policyholders accept either person can answer questions and both accept responsibility for the accuracy and honesty of the answers.
3. **You** must keep **your** premium payments up to date.

Conditions 4 to 11 (below) explain how **you** must pay **your** premium, what happens if **you** or **we** cancel **your policy** and what happens if **you** do not keep **your** payments up to date.

4. This is an annual contract of insurance which means that **you** must pay the full premium amount for the full **period of insurance** in one payment or in monthly instalments, however, cancellation rights apply.
5. If after receiving **your Schedule of Insurance** and **policy** booklet, **you** decide that **you** would not like to proceed with the insurance, **you** can cancel **your policy** in the **cooling off period**. In this case, please contact **us** by telephone or in writing within this period and provided **you** have not made a claim, **we** will cancel **your policy** and refund **you** any premium paid for the **period of insurance**.
6. If **you** wish to cancel outside of the **cooling off period** and **you** pay by monthly instalments, **we** will not charge **you** any further payments. If **you** pay annually, **we** may provide **you** with a pro rata refund, based on any complete months of the remaining **period of insurance**. If a claim has been settled in respect of this **period of insurance**, **we** will not provide **you** with a refund and **you** must pay the remaining premium for the **period of insurance**. Or, **we** will deduct the rest of the instalments for the **period of insurance** and any outstanding instalments from any claim payment.
7. It is **your** responsibility to make sure **you** have sufficient funds in **your** bank/card issuer account and **your** bank/card issuer pays **your** full premium or instalments on time. It is not **our** responsibility to tell **you** that **you** have not made a payment.
8. If **your** bank/card issuer tells **us** that they cannot make **your** payment **we** will contact them again to request it and **we** will charge **you** for this extra administration. If **your** bank/card issuer makes a charge for processing **our** payment requests it is **your** responsibility to pay the amount.
9. If **you** do not make **your** payment on time, **you** must contact **us** within seven days of the date **you** should have paid the monthly instalment or the full premium to arrange payment. If payment has not been received within 28 days from the date **you** should have made the payment, **we** will cancel **your policy** from the due date.
10. If **you** pay by monthly instalments and during the **period of insurance** **you** do not pay three monthly instalments on time **we** may agree to continue **your** insurance. If **we** agree **you** must pay in one total payment:
  - an administration charge; and,
  - any outstanding instalments; and,
  - the instalments for the rest of the **period of insurance**.

This payment must reach **us** within 28 days of the date **you** should have paid the third missed instalment.

11. If **we** fail to request **your** payment, **you** must pay the missed payment(s) when asked.

12. If **you** wish to cancel **your policy** **you** can do this by emailing **us** at info@agriapet.co.uk, telephoning **us** on 3330 30 83 98 or writing to **us** at:  
Agria Pet Insurance Ltd  
PO Box 506  
Manchester M28 8EN

**You** must comply with Conditions 13 to 17 (below) to have the full protection of **your policy**. If **you** do not comply, **we** may cancel the **policy**, refuse to deal with **your** claim or reduce the amount of any claim payment.

13. **You** must keep **your rabbit** vaccinated within manufacturer's guidelines against myxomatosis, viral haemorrhagic disease (VHD) and rabbit viral haemorrhagic virus disease type two (RVHD2). If **you** do not keep **your rabbit** vaccinated **we** will not help **you** with any costs that result from an **illness** **you** must vaccinate it against.
14. A **vet** must supervise all vaccinations. Homeopathic nosodes are not acceptable as vaccines.
15. **You** must take all reasonable precautions to maintain **your rabbit's** health, prevent:
- the loss or theft of **your rabbit**;
  - **injury** or **illness** to **your rabbit**, including following any advice from a **vet** regarding **your rabbit's** wellbeing and any instructions from a **vet** to reduce **your rabbit's** weight.
16. **You** agree that **your** current or previous **vet** can give **us** information and records about **your rabbit** and if the **vet** charges **you** for this information **you** will have to pay.
17. **You** agree that **we** can contact the breeder of **your rabbit** and that they can release information or records about **your rabbit**.

Conditions 18 to 23 (below) explain the things that **you** can choose and **we** can do that can affect **your** insurance.

18. **We** may agree to issue this **policy** to two people as joint policyholders. If **we** do agree **we** will accept instructions to make any changes, payments, claims, cancellation or anything else to do with this **policy** from either person and both policyholders accept that the other person is also acting on their behalf.
19. The amount of **your percentage excess** cannot be reduced and can only be increased at the renewal of **your policy**.
20. The **policy** is a series of yearly contracts of insurance with no guarantee that **we** will offer a new contract each year.
21. If **we** offer to renew **your policy** **we** may change **your**: premium, **policy** terms, conditions, **fixed excess** and **percentage excess** and the monetary amount of cover under any section.
22. If **we** hold valid payment details for **you** and **we** offer to renew **your policy** it will automatically renew. **You** accept that **we** will use the payment details **you** have previously given **us** to continue to take payment(s) from **your** bank account or credit/debit card. If **you** do not want **your policy** to automatically renew **you** must tell **us**.
23. **We** do not tolerate any abusive, aggressive or inappropriate behaviour towards **our** staff and if **you** act in such a way **we** may cancel **your policy**.

## CLAIMS CONDITIONS

**You** must comply with the following conditions to have the full protection of **your policy**. If **you** do not comply, **we** may cancel the **policy**, refuse to deal with **your** claim or reduce the amount of any claim payment.

1. **You** must submit **your** claim by the end of the **period of insurance** or within six months from the first date of treatment, whichever is the latter. If **you** do not submit **your** claim to **us** within this time frame **we** will not deal with **your** claim.
2. If **you** make a claim under this **policy** and another insurance also provides cover **you** must tell **us** the name and address of the other insurance company, the reference number and notify them about **your** claim. If **you** do not notify the other insurance company **we** will not help **you** with **your** claim. **We** will not pay more than **our** share.
3. **You** must give **us** all information that **we** reasonably ask for in connection with a claim, be available for interviews and cooperate with **us** or any one acting for **us**.
4. If **you** have any legal rights against any other person resulting from the circumstances that led to **your** claim, **we** may take legal action against them in **your** name at **our** expense. **You** must help **us** by providing any documents, written statements, names and addresses of people involved. **You** agree to go to court if necessary.
5. **You** agree that any **vet** can provide any information about **your rabbit** that is relevant to any claim. If the **vet** makes a charge for this **you** agree to accept the cost.
6. If there is a disagreement between **your vet** and **our vet**, **we** will appoint an independent **vet**, agreed by **you**, to arbitrate and **you** and **we** agree to accept the independent **vet's** decision.
7. When a **vet** or complementary therapist who has, or is about to treat **your rabbit** contacts **us** about **your policy** and **we** agree to give them information. **We** will tell them:
  - If **you** have a current **policy**.
  - The start and renewal date of **your policy**.
  - What **your policy** covers.
  - **Your fixed excess** and **percentage excess** amounts.
  - Information about how any outstanding premium payments could affect a claim payment.
8. **We** may use external claims investigators to help **us** deal with **your** claim which may delay the time it takes to process **your** claim.
9. **We** will not pay **your** claim if:
  - **Your** claim form is not correct and complete.
  - **We** do not have all the information needed to support **your** claim.
  - **We** are not sure **your** claim is valid.
  - Any legal action or other action is outstanding.
10. If **your policy** is in joint names **we** will accept a claim from either person and, if **we** agree, may make claim payments

and premium refunds in line with either person's instructions.

11. If **we** make a payment that is later found to have been made in error, **you** must repay this to **us** when asked.

12. Unless **we** receive:

- a full breakdown of the costs of **veterinary treatment your rabbit** is about to have; and,
- **your rabbit's** full medical history,

**we** cannot tell **you** on the telephone or by email if **your policy** covers a claim under the Veterinary Fees **policy** section either:

- before **your rabbit** receives **veterinary treatment**; or,
- after **your rabbit** receives **veterinary treatment** and before **you** make a claim.

If **we** provide some information about a possible claim or what **your policy** covers, **you** accept that this does not mean **we** will pay **your** claim.

## HOW TO CLAIM

1. **You** must always use a claim form to submit **your** claim unless the **policy** section says **you** can send a letter.

**You** can submit a claim online or download a claim form at **our** website at [www.agriapet.co.uk](http://www.agriapet.co.uk), **you** can email **us** at [apiclaims@agriapet.co.uk](mailto:apiclaims@agriapet.co.uk) or call **us** on 03330 30 83 99 to ask for a claim form.

2. **We** will need **your policy** number if **you** email or call **us**. Please note that calls may be monitored or recorded to assist with training and for quality control purposes.

3. **You** do not need to contact **us** before any **veterinary treatment** begins.

4. **You** must follow the "How to Claim" procedure shown in the section of cover that **you** are claiming under.

5. Send **your** completed claim form and supporting documents to:

Agria Pet Insurance Ltd  
PO Box 506  
Manchester M28 8EN

## FRAUD

**We** will investigate any activity that **we** suspect may be fraudulent. Fraud increases the premiums of all policyholders.

**You** must not act in a fraudulent manner. If **you** or anyone acting for **you**:

- Provide information when **you** take out this **policy** or renew it knowing the information is false or fraudulently exaggerated in any way; or,
- Make a claim knowing it is false, dishonest or fraudulently exaggerated in any way; or,
- Make a statement or submit a document in support of a claim knowing it is false or incorrect in any way; or,
- Make a claim for anything **you** have done deliberately or deliberately allowed to happen; or,
- Make a claim that involves **your** dishonesty; or,
- Gives **us** reasonable grounds to suspect **you** have acted fraudulently or dishonestly.

Then **we** will:

- Not pay **your** claim or any other claims.
- Cancel any **policy** **you** have with **us**, either from the start or after giving **you** seven days' notice.
- Take legal action against **you** to recover the amount of any claims already paid.
- Tell the police Insurance Fraud Enforcement Department (IFED) and any other appropriate authorities.
- Tell other insurance companies and the Insurance Fraud Investigators Group (IFIG).
- Refuse to offer further policies to **you**.

## CUSTOMER SERVICE AND COMPLAINTS

If **you** have a question or would like more information about **your policy** or claim **you** can contact **us**:

- By email at [info@agriapet.co.uk](mailto:info@agriapet.co.uk)
- By telephone:

Agria Pet Insurance Customer Service UK: Telephone 03330 30 83 98 Outside UK: Telephone +44 (0) 1296 319248

Agria Pet Insurance Claims UK: Telephone 03330 30 83 99 Outside UK: Telephone +44 (0) 1296 319247

In most cases the Customer Service and Claims teams can answer **your** questions or resolve any issues within 24 hours.

**We** and the **Insurer** are committed to provide **you** with an exceptional level of service and customer care. However, things can go wrong and there may be times when **you** feel **you** have not received the service **you** expect. When this happens **we** and the **Insurer** want to hear about it to try to put things right.

## HOW TO COMPLAIN

**We** take complaints seriously and want to hear from **you** if **you** are not completely happy with the service **you** have been provided with so **we** can try to address **your** concerns. If **you** wish to make a complaint, please contact **us** by telephone, in the first instance, so **we** can try and resolve **your** issue.

Detailed below are all the methods that **you** can use to contact **us**:

Telephone:

Agria Pet Insurance Customer Service 03330 30 83 98

Agria Pet Insurance Claims 03330 30 83 99

Email: [info@agriapet.co.uk](mailto:info@agriapet.co.uk)

Post: Complaints

Agria Pet Insurance Ltd  
PO Box 506  
Manchester  
M28 8EN

If **you** complaint cannot be resolved within three business days **we** will:

- Acknowledge **you** complaint promptly by email or post
- Investigate **you** complaint thoroughly and as quickly as possible
- Keep **you** informed of the progress of **you** complaint within four weeks of receiving it, if it has not already been resolved
- Provide **you** with a final response letter confirming **our** investigation and conclusion in no later than eight weeks of receiving **you** complaint.

If **you** remain dissatisfied **you** have the right to refer **you** complaint to the Financial Ombudsman Service, free of charge - but **you** must do so within six months of the date of **our** final response letter. If **you** do not refer **you** complaint in time, the Ombudsman will not have **our** permission to consider **you** complaint and so will only be able to do so in very limited circumstances. They can be contacted at:

Financial Ombudsman Service

Exchange Tower

London

E14 9SR

Telephone 0300 123 9 123 or 0800 0234 567

Email to [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk) Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

Referral to the Financial Ombudsman does not affect **you** right to take legal action against Agria Försäkring.

## REGULATORY INFORMATION

Agria Försäkring is the **UK** branch of Försäkringsaktiebolaget Agria (publ) who are registered in Sweden with Company Registration Number 516401-8003. Registered office: Box 703 06, 107 23 Stockholm, Sweden. Försäkringsaktiebolaget Agria (publ) is authorised and regulated by Fininspektionen in the jurisdiction of Sweden. Authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority (Firm Reference Number 623469). Details about the extent of **our** regulation by the Prudential Regulation Authority are available from **us** on request.

Agria Pet Insurance Ltd is authorised and regulated by the Financial Conduct Authority, Financial Services Register number 496160. Agria Pet Insurance Ltd is registered and incorporated in England and Wales with registered number 4258783. Registered office: First Floor, Blue Leanie, Walton Street, Aylesbury, Buckinghamshire, HP21 7QW.

Agria Pet Insurance Ltd and Försäkringsaktiebolaget Agria (publ) are regulated by the Jersey Financial Services Commission (JFSC).

## WHO ADMINISTERS THIS INSURANCE

Agria Pet Insurance Ltd arrange and administer this Pet Insurance **policy**. 100% of the shares of Agria Pet Insurance Ltd are owned by Försäkringsaktiebolaget Agria (publ). Agria Pet Insurance Ltd does not provide advice or personal recommendation to tell **you** if this **policy** is suitable for **you** specific needs.

## FINANCIAL SERVICES COMPENSATION SCHEME (FSCS)

Försäkringsaktiebolaget Agria (publ) is covered by the FSCS, which is triggered when an authorised firm goes out of business. In this unlikely event **you** may be entitled to compensation from the scheme:

**You** can get more information from the Financial Services Commission Scheme at [www.fscs.org.uk](http://www.fscs.org.uk) or by calling 0800 678 1100 or 020 7741 4100.

## REMUNERATION DISCLOSURE

**We** receive commission from the **insurer** which is a percentage of the total annual premium. **Our** sales team, partners and introducers may also receive monetary incentives for services that they provide.

## AGRIA PET INSURANCE PRIVACY NOTICE

**This privacy notice was last updated on 26 October 2022**

Your privacy is very important to us and we want you to feel confident in that and so have made this notice as transparent as possible.

This privacy notice explains how and what type of personal data will be collected and processed and under what lawful basis. It applies to all of our customers, partners and affiliates we may work with. Please read this with care as by using our services you agree to this privacy notice.



## Who are we?

- Agria Pet Insurance Ltd who is the insurance intermediary and a limited company registered in England with the company registration number 4258783 and registered address 1st Floor, The Blue Leanie, Walton Street, Aylesbury, England, HP21 7QW.
  - Agria Försäkring is the UK branch of Försäkringsaktiebolaget Agria (publ) who are registered in Sweden with Company Registration Number 516401-8003. Registered office: Box 703 06, 107 23 Stockholm, Sweden. Försäkringsaktiebolaget Agria (publ) is authorised and regulated by Finansinspektionen in the jurisdiction of Sweden. Authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority (Firm Reference Number 623469). Details about the extent of our regulation by the Prudential Regulation Authority are available from us on request.
- Other Agria trading names we use are:
- The Kennel Club Pet Insurance

We process your personal data in line with the UK General Data Protection Regulation (UK GDPR), The Data Protection Act 2018 and any other relevant data protection legislation.

## What personal data do we collect?

The personal data we collect and process includes:

- Personal information including title, name, date of birth, email address, postal address and telephone numbers (current and previous)
- Your usernames or passwords for any online accounts you have set up with us
- Data you have provided to us to be part of one of our breeder clubs
- Your bank details
- Your animal's information
- Claim information
- Data from you visiting our websites such as:
  - IP addresses
  - Google analytics
  - Hot jar tracking software when visiting our website.
- Details of the affiliate you used who introduced you to us such as your breeder, vet or rehoming centre

## Special Category Data

We will only hold data if this is information you have volunteered to us and provided consent for which will help us service your insurance contract with us more efficiently.

## How we process your personal data

Below are the reasons for collecting and processing this data and the legal basis in line with the relevant data protection laws:

### • Performance of a contract

The data is necessary for the performance of a contract of insurance to which you are party to and you have taken steps to enter into as well as data to be able to generate and provide you with a quote. Without this data, we cannot fulfil our contractual obligations to you and cannot fully administer your insurance quote or policy with us.

This also includes:

- Servicing and managing your policy
- Assessing, processing and paying claims for your policy
- Contacting you in relation to your policy with non-marketing communications e.g. confirmation of policy set up, policy documentation, complaint communications, mid-term adjustment information, payment reminders and any communication in response to a query you have sent us

### • Legitimate Interests

We rely on "legitimate interests" from data protection laws to be able to process your data for the following reasons:

- To contact you in regard to our free insurance policies and joining the Agria Breeder Club for the litters that you have or may breed in the future.
- Improving our products, services and offers by emailing you or sending you an SMS to ask you to complete a customer experience review.
- Sending you promotional emails about products or groups we think you may be interested in.
- Customising the marketing material we send you (e.g. we send newsletters containing relevant articles based on your activity on our website).
- Targeting online advertising to you on other websites because we believe it is relevant to you. For example, we might ask Google or Facebook to either (a) show you adverts based on your characteristics or interests, e.g. to only show our advert to people interested in dogs or horses; or (b) show you adverts based on your visit to our website, e.g. where you have read an article about specialist pet or equine insurance, we might show you an advert for one of our specialist pet or equine insurance products.

- Improving our products, services and offers with online surveys and by emailing you asking you to complete Trustpilot or customer experience reviews, which enable you to leave reviews of how you found the experience of dealing with Agria Pet Insurance Ltd.
- Monitoring website usage, including website usage statistics and third-party hyperlink click tracking. We use google analytics to do this and we do not have access to the underlying data, only aggregated views of it (e.g. to see how many users visited our website in a certain timeframe, which pages were most popular, and which website visitors came from for instance directly, via Google, or from Facebook).
- Tracking if you have purchased a product from a cash-back site to enable us to pay the correct third-party.
- Creating Management Information to help us with pricing decisions.
- Using your comments on specific social media posts to inform the development of new insurance products.
- We may use your telephone number to call you to see if we can help you with purchasing a pet or equine insurance policy.

- **Explicit consent**

You have given your explicit consent to allow us to process your personal data for a specific reason. You can withdraw your consent at any time, please see 'Rights' section on how to do this.

- **Legal obligation**

The data is necessary in order to fulfil our legal and/or regulatory obligations for the prevention of financial crime, to comply with financial sanctions legislation or The Companies Act 2006 for retaining personal and financial data and The Finance Act 2021 for retaining financial data.

## **Marketing**

We may contact you from time to time for marketing purposes separate to the reasons stated above and you will always have the option to opt out of this contact.

## **Automated decision-making & Profiling**

We do not use your personal data for any automated decision making. We may sometimes use your data for profiling solely for ensuring we are contacting you with regard to the most relevant products or services to meet your needs. We may also use speech analytics on recorded telephone calls to help us identify vulnerable customers, deliver training and ensure quality control however, this data is reviewed manually.

## **International transfers of data**

We do not transfer any data outside of the European Economic Area (EEA). Now that the UK has left the European Union (EU), any personal data shared outside of the UK is still within the EEA and is done so in line with the relevant data protection laws.

## **Who we might share your information with**

- Our approved suppliers, contractors and market research companies in order to be able to evaluate and improve our policies, products, service and processes and to deliver policies effectively.
- Our insurers, legal advisors or other third parties who need access to it in the context of managing, investigation or defending claims or complaints.
- Regulatory or government bodies including but not limited to police forces, local authorities or council, The Financial Conduct Authority, The Prudential Regulation Authority, the Swedish Financial Supervisory Authority (Finansinspektionen), The Jersey Financial Services Commission, The Financial Ombudsman Service, The Channel Islands Financial Ombudsman and His Majesty's Revenue & Customs (HMRC) when it is necessary to do so to ensure compliance with relevant legislation.
- Fraud prevention agencies or third parties when assisting to prevent financial crime.
- Meta Platforms Inc for the purpose of providing advertisements relating to Agria products and services.
- Our partner or affiliate where you were originally introduced to us in relation to your insurance policy e.g. your vet, breeder, rehoming centre or microchipping organisation.
- Your Vet practice with information for one or several of the reasons set out below:
  - To allow them to up-date your records that your pet or horse is insured with us.
  - To discuss any claims that you have, are potentially or have previously submitted.
  - When a vet or complementary therapist who has, or is about to treat your pet or horse contacts us about your policy, in order for them to continue to treat your pet or horse, we may advise them:
    - If you have a current policy
    - The start and renewal date of your policy
    - What your policy covers or doesn't cover
    - Your fixed excess and percentage excess amounts
    - Information about how any outstanding premium payments could affect a claim payment.

## **What are your rights relating to your personal data?**

All individuals have rights under data protection legislation which are listed below. Agria have measures and processes in place in order to deal with any requests made when exercising these rights.

- **Your right to access the personal data we hold on you**

You can request all personal data we hold on you. You have the right to contact us to request this using one of the contact methods stated below. We will review this and provide you with the information we have at the earliest opportunity, however, if the request is complex, we will contact you within 30 days to explain this and we may charge a fee for this if the request is excessive and/or manifestly unfounded.

- **The right to rectification if your personal data is inaccurate or incomplete**

We strive to ensure that we have the most accurate and up to date data, however, please advise us as soon as possible, if any of the information we hold on you is inaccurate and we will rectify it.

- **The right to erasure**

You can request that your personal data is removed or deleted where you believe that there is no legal basis or compelling reason for this to be processed any longer.

- **The right to restrict the processing of your data**

You have the right to request that the processing of your data is restricted in circumstances such as when you contest the accuracy of the data or when the processing is unlawful.

- **The right to obtain and reuse your personal data for your own purposes across different services or organisations if this is technically viable.**

- **The right to object to the processing** of your personal data if you do not want it processed for the purposes of direct marketing or if the data is not being processed with the legal basis of legitimate interests.

- **The right to withdraw your consent** that you provided to us at any time. If you have provided us with your explicit consent to process your data, you can withdraw this at any time.

- **The right to lodge a complaint** about the processing of your personal data with a Supervisory Authority.

The relevant Supervisory Authority is The Information Commissioners Office (ICO), please visit their website which advises you of the best method to contact them, [www.ico.org.uk](http://www.ico.org.uk).

### **Contact us**

We have a Data Protection Officer who has a high level responsibility for monitoring compliance with all relevant data protection regulations and is the lead contact for liaison with The Information Commissioners Office (ICO).

To exercise any of your rights mentioned above or with any specific queries on the personal data we hold on you, please contact us by post or email using the below details:

The Data Protection Officer  
Agria Pet Insurance Ltd  
PO Box 506,  
Manchester,  
M28 8EN  
Email: [info@agriapet.co.uk](mailto:info@agriapet.co.uk)

### **How long do we keep your information for?**

If you are a customer, we will keep your personal data and telephone conversations for a period of 6 years after you cancel your policy or after the last claim is closed, whichever is the latter. We are required to retain your data for the amount of time as required by law or in order to defend potential legal claims. For all personal data that we retain, we consider the amount, nature and sensitivity of the personal data, the potential risk of harm from unauthorised use or disclosure of your personal data, the purposes for which we process your personal data and whether we can achieve those purposes through other means, and the applicable legal requirements.





This insurance is administered  
by Agria Pet Insurance Ltd



This insurance is underwritten by  
Agria Försäkring