



*Scottish Equestrian  
Insurance Services*

# Your Horse and Rider Insurance Policy Booklet

Effective 1<sup>st</sup> November 2009

This booklet contains your:

- Policy Summary
- Terms and Conditions

**Please contact us if you require a copy of this booklet in large print or Braille.**

# Your Horse and Rider Insurance Policy Summary

This policy summary does not contain the full Terms and Conditions of your policy; full details can be found in your Terms and Conditions.

## What type of insurance is this?

This policy provides horse and rider insurance.

## Who is the insurer?

Allianz Insurance plc.

## How long does my policy run for?

This policy will remain in force for 12 months from the date it starts and for any period for which you renew the policy, as long as you continue to pay the premium.

## What are the significant features and benefits of my horse and rider policy?

The table below includes the details of the significant benefits offered by Scottish Equestrian Insurance Services.

**Please note, most sections are optional and are only covered if they are shown on your Certificates of Insurance.**

<b>Death of your horse (Injury or Illness)</b>	If your horse dies due to an illness or injury, this section covers your horse's market value (or sum insured, whichever is less).
<b>Death of your horse (Injury Only - Mature Horse)</b>	If your horse dies due to an injury, this section covers your horse's market value (or sum insured, whichever is less).
<b>Loss by Theft or Straying</b>	If your horse is stolen or goes missing and cannot be found, this section covers your horse's market value (or the sum insured, whichever is less). We will also pay up to £300 towards the cost of advertising and a reward.
<b>Veterinary Fees (Injury and Illness)</b>	This section covers the cost of veterinary treatment required to treat illness and injury. Each illness and injury is covered for a period of 12 months. The maximum amount you can claim for each injury or illness is shown on your Certificate of Insurance Horse Details.
<b>Veterinary Fees (Injury Only - Mature Horse)</b>	This section covers the cost of veterinary treatment required to treat injury. Each injury is covered for a period of 12 months. The maximum amount you can claim for each injury is shown on your Certificate of Insurance Horse Details.
<b>Alternative Therapies</b>	This section covers the cost of acupuncture, chiropractic manipulation, feed supplements, herbal medicine, homeopathy, hydrotherapy, nutraceuticals, osteopathy, physiotherapy and specialist farriery. The maximum amount you can claim for all alternative therapies in each policy year is shown on your Certificate of Insurance Horse Details.

<b>Non-Veterinary Fees</b>	If your horse needs to go to a veterinary college/hospital, this section covers the livery charges at, and the transportation of your horse to and from, the veterinary college/hospital. The maximum amount you can claim for all non-veterinary fees in each policy year is shown on your Certificate of Insurance Horse Details.
<b>Disposal</b>	If your horse dies, we will pay towards the cost to remove and dispose of your horse's body. The maximum amount you can claim is shown on your Certificate of Insurance Horse Details.
<b>Permanent Loss of Use</b>	If an injury or illness permanently prevents your horse from participating in any one of the insured activities, we will pay a percentage of your horse's market value (or sum insured, whichever is less). The percentage you have chosen is shown on your Certificate of Insurance Horse Details.
<b>Saddlery and Tack</b>	If your saddlery and tack is damaged we will pay the cost of repair. If the repair costs are more than the item is worth, or the item is stolen or destroyed we will cover the cost to replace as new. The maximum amount you can claim under this section is shown on your Certificate of Insurance Saddlery and Tack Details.
<b>Personal Accident</b>	This section covers the rider of your horse for injury or death, including the cost of emergency dental treatment. The maximum amount you can claim for each incident is shown on your Certificate of Insurance Horse Details and the amount you can claim for each type of injury sustained is shown in the Personal Accident section of the Terms and Conditions.
<b>Personal Liability</b>	If your horse, your horse-drawn vehicle or your horse trailer causes damage or injury and you are legally responsible, this section covers the legal costs and expenses and the claimant's compensation. The maximum amount you can claim for each incident is shown on your Certificate of Insurance Horse Details.
<b>Horse-Drawn Vehicles or Horse Trailers</b>	If your horse trailer or horse-drawn vehicle is damaged, we will pay the cost of repair. If the repair costs exceed the market value, or the item is stolen or destroyed, we will pay the market value (or sum insured, whichever is less).

### What are the significant exclusions and limitations of my horse and rider policy?

This section covers the significant exclusions and limitations of all the benefits offered. Please be aware that your policy may not include the benefits mentioned below.

*Further information regarding the points below can be found in the Terms and Conditions in the sections indicated.*

- Your horse must have an annual dental examination. *See General conditions that apply to all sections of your policy - point 5.*
- Your insurance does not cover any illness which starts in the first 14 days of the policy or any pre-existing conditions. If your horse was ill or injured at any time before your insurance started we will not cover any costs relating to that illness or injury. This is in addition to any specific exclusion(s) on your policy. *See 'What we will not pay' sections of Death of your horse (Injury or Illness) - points 7 and 8, Death of your horse (Injury Only - Mature Horse) - point 7, Veterinary Fees (Injury and Illness) and Permanent Loss of Use - points 4 and 5, and Veterinary Fees (Injury Only - Mature Horse) - point 4.*
- This policy covers an illness or injury for 12 months only. The 12 months starts on the date the injury happened or the date the illness was first noticed and after this time we will not cover any claims for that or any related injury or illness. *See 'What we will not pay' sections of Death of your horse (Injury or Illness) and Death of your horse (Injury Only - Mature Horse) - point 3, Veterinary Fees (Injury and Illness) and Veterinary Fees (Injury Only - Mature Horse) - points 2 and 3, and Permanent Loss of Use - point 2.*

- Your insurance does not cover any charges made for the completion of claim forms. *See 'How to claim'.*
- You must send us your Veterinary Fees claim(s) within 12 months of the treatment start date. *See 'How to claim'.*
- The Non-Veterinary Fees benefit only covers transportation costs to and from, and livery charges at, a veterinary college/hospital, if your horse is referred by your vet for a second opinion or specialist treatment. *See Non-Veterinary Fees - What we will not pay, point 5.*
- In the event of a Permanent Loss of Use claim, if your horse can still be ridden or used for breeding we will only pay 60% of the selected percentage. This means that if you have chosen permanent loss of use at:
  - 100%, we will pay 60%,
  - 75%, we will pay 45%, or
  - 50% ,we will pay 30%,

Of the market value (or sum insured, whichever is less) of your horse. *See Permanent Loss of Use, Special conditions that apply to this section - point 10.*

- Permanent Loss of Use will be automatically removed at the renewal following your horse's 15th birthday. *See Permanent Loss of Use, Special conditions that apply to this section - point 1.*
- If you have cover under Section 1A - Death of your horse (Injury or Illness) and/or Section 3A - Veterinary Fees (Injury and Illness), when your horse reaches 20 years of age all cover for illness will stop and these sections will automatically change to Section 1B - Death of your horse (Injury Only - Mature Horse) and/or Section 3B - Veterinary Fees (Injury Only - Mature Horse). In addition, if you have cover for Alternative Therapies, Non-Veterinary Fees and Disposal, at the same time these sections will be limited to injury only. *See Special Conditions that apply to Section 1A Death of your horse (Injury or Illness) and Section 1B Death of your horse (Injury Only - Mature Horse) - point 13, and Special Conditions that apply to Sections 3A Veterinary Fees (Injury and Illness) and Section 3B Veterinary Fees (Injury Only - Mature Horse) - point 10.*
- Your saddlery and tack must be kept secure at all times:
  - When left unattended in a building, the building must be locked with 5-lever mortice deadlocks (or equivalent locks) and if the building is not the building you live in, it must also have steel bars or grids on all windows.
  - When left unattended in a vehicle, the saddlery and tack must be stored in a locked boot or the specially designed covered area of a locked vehicle.

*See Saddlery and Tack, What we will not pay - point 4.*

- The maximum amount we will pay for any item of saddlery and tack where you do not have a purchase receipt or saddler's valuation, is £400. *See Saddlery and Tack, What we will not pay - point 2.*
- When it is not in use, your horse trailer or horse-drawn vehicle must be fitted with a wheel clamp or a hitch lock or it must be left in a properly locked building. *See Horse-Drawn Vehicles or Horse Trailers, What we will not pay - point 9.*

**Additional exclusions may apply to your policy. If so, these will be shown on your Certificates of Insurance.**

### **Can I cancel my policy?**

If, after receiving your Certificates of Insurance and full policy Terms and Conditions, you are not happy you have 14 days during which you can cancel the policy. In this case we will cancel your policy and you will receive a full refund of any premiums paid. Full cancellation rights can be found in your Terms and Conditions.

## **How do I make a claim?**

You can notify us of a claim and obtain a claim form by calling 0845 070 1063. Alternatively, if you already have a claim form or have downloaded a claim form from our website, [www.seisinsurance.co.uk](http://www.seisinsurance.co.uk), you can notify us by sending the completed claim form to:

Scottish Equestrian Insurance Services  
Great West House (GW2)  
Great West Road  
Brentford  
Middlesex  
TW8 9DX  
United Kingdom

## **How do I make a complaint?**

If you have a complaint please contact our Customer Satisfaction Manager at:

Scottish Equestrian Insurance Services  
Great West House (GW2)  
Great West Road  
Brentford  
Middlesex  
TW8 9DX  
United Kingdom

Alternatively phone 0845 026 1985 or email [ahd.csm@allianz.co.uk](mailto:ahd.csm@allianz.co.uk)

If we are unable to resolve the problem we will provide you with information about the Financial Ombudsman Service. Full details of our complaints procedure may be found in your Terms and Conditions. Using our complaints procedure and referral to the Financial Ombudsman Service does not affect your legal rights.

## **Financial Services Compensation Scheme (FSCS)**

You may be entitled to compensation from the FSCS if we cannot meet our liabilities.

# Your Horse and Rider Insurance Policy

## Terms and Conditions

### Written in Plain English

These Terms and Conditions are part of **your** insurance contract. The other parts are **your Certificates of Insurance** and **your** written, internet or telephone application.

These Terms and Conditions include 11 sections of cover. Please be aware that most of the sections of cover are optional and may not be included in **your policy**. The section is only included in **your policy** if it is shown on **your Certificates of Insurance**. To understand exactly what **your** insurance contract covers **you** must read **your Certificates of Insurance**, together with these Terms and Conditions.

### Definitions

If **we** explain what a word means, that word will have the same meaning wherever it appears in these Terms and Conditions.

<b>12 months:</b>	365 days calculated from and including the date an <b>injury</b> happened or the first <b>clinical signs</b> of an <b>illness</b> were noticed.
<b>Alternative therapy/ alternative therapies:</b>	The cost of any examination, consultation, advice, test and legally prescribed medication for the following procedures where they treat <b>illness</b> and <b>injury</b> : <ol style="list-style-type: none"><li>1. Acupuncture, chiropractic manipulation, feed supplements, herbal medicine, homeopathy, nutraceuticals, osteopathy, physiotherapy and <b>specialist farriery</b>. The treatment must be carried out either by a <b>vet</b> or on a <b>vet's</b> referral by a therapist or farrier who holds a <b>UK</b> recognised qualification in their subject.</li><li>2. Hydrotherapy carried out by a <b>vet</b> or by a therapist following referral by <b>your</b> usual <b>vet</b>.</li></ol>
<b>Certificates of Insurance:</b>	The printed documents showing the Policy Details and Horse Details and if applicable the Saddlery and Tack Details and/or Trailer Details, which also state any extra exclusions and clauses that apply to <b>your policy</b> .
<b>Class of use:</b>	The purpose(s) for which the horse is kept and for which it is insured. <b>Class A :</b> British Eventing 1 and 3 day events (pre-novice level only), brood mares, dressage (below elementary level), driving, gymkhanas, hacking, heavy horses (breeding and showing), long distance riding (under 25 miles), Riding Club or Pony Club events, showing, show jumping (under BSJA rules and unaffiliated), stallions, young horses. <b>Class B :</b> As Class A but also including: British Eventing 1 and 3 day events (novice level and above), combined training, dressage (elementary level and above), hunter trials, hunting, long distance riding (25 miles and over).
<b>Clinical sign(s):</b>	A change(s) in <b>your horse's</b> normal healthy state, condition, appearance, or bodily function.
<b>Elective treatment, diagnostic or procedure:</b>	Any treatment, diagnostic or procedure <b>you</b> request, which <b>your vet</b> confirms is not necessary.
<b>Excess:</b>	The amount shown on <b>your</b> Certificate of Insurance Horse Details. This is the amount <b>you</b> must pay towards each <b>illness</b> or <b>injury</b> that is not related to any other <b>illness</b> or <b>injury</b> . This amount will be deducted from the first claim(s) for that <b>illness</b> or <b>injury</b> .
<b>Illness:</b>	Sickness, disease or any change(s) to <b>your horse's</b> normal healthy physical state or appearance.

## Definitions (continued)

<b>Illness which starts in the first 14 days of cover or during injury only temporary cover:</b>	<p>a) An <b>illness</b> showing <b>clinical signs</b>,</p> <p>b) An <b>illness</b> which is the same as, or has the same diagnosis or <b>clinical signs</b>, as an <b>illness</b> which showed <b>clinical signs</b>, or</p> <p>c) An <b>illness</b> that is caused by, relates to, or results from, an <b>illness</b> which showed <b>clinical signs</b>,</p> <p>In:</p> <ul style="list-style-type: none"><li>• The first 14 days of <b>your horse's</b> first <b>policy year</b>,</li><li>• The first 14 days of the date this section was added to <b>your</b> insurance, or</li><li>• The dates of <b>injury only temporary cover</b>,</li></ul> <p>No matter where the <b>illness</b> or <b>clinical signs</b> were noticed or happened in, or on, <b>your horse's</b> body.</p>
<b>Immediate family:</b>	<b>Your</b> parent, brother, sister, son, daughter, spouse, life partner or civil partner.
<b>Injury:</b>	Physical damage or trauma caused immediately by an accident. Not any physical damage or trauma that happens over a period of time.
<b>Injury only temporary cover:</b>	The cover explained in <b>your</b> 'Injury Only Temporary Cover Important Information Booklet' and any letter extending the time of this cover.
<b>Loan:</b>	An agreement where a person other than the owner of the horse is responsible for the horse's stabling, grazing, health and general care.
<b>Market value:</b>	The price generally paid for: <ul style="list-style-type: none"><li>• A horse of the same age, breed, bloodline, sex and ability as <b>your horse</b> just before the <b>injury</b> happened or the <b>illness</b> first showed <b>clinical signs</b>,</li></ul> Or <ul style="list-style-type: none"><li>• A horse-drawn vehicle or horse trailer of the same age, type and condition as <b>your horse-drawn vehicle or horse trailer</b> just before the theft or damage occurred.</li></ul>
<b>Maximum benefit:</b>	The most <b>we</b> will pay as shown on <b>your</b> Certificate of Insurance Horse Details and if applicable <b>your</b> Certificate of Insurance Saddlery and Tack Details.
<b>Our vet:</b>	The <b>vet we</b> employ to review <b>your horse's</b> case history, discuss <b>your horse's</b> treatment with <b>your vet</b> and/or carry out treatment for <b>your horse</b> .
<b>Policy year:</b>	The time during which <b>we</b> provide cover as shown on <b>your</b> Certificate of Insurance Policy Details. This is normally 12 months but may be less if <b>your horse</b> , <b>your saddlery and tack</b> , <b>your horse-drawn vehicle or trailer</b> or a section of cover, has been added to, or deleted from, <b>your policy</b> or <b>your policy</b> has been cancelled.
<b>Pre-existing condition:</b>	<p>a) An <b>injury</b> that happened or an <b>illness</b> that first showed <b>clinical signs</b>, or</p> <p>b) An <b>injury</b> that is the same as, or has the same diagnosis or <b>clinical signs</b> as an <b>injury</b> that happened or an <b>illness</b> which first showed <b>clinical signs</b>, or</p> <p>c) An <b>injury</b> or <b>illness</b> that is caused by, relates to, or results from, an <b>injury</b> that happened or an <b>illness</b> which first showed <b>clinical signs</b>,</p> <p>Before:</p> <ol style="list-style-type: none"><li>1. <b>Your horse's</b> cover started, or</li><li>2. The date the section of cover was added to <b>your policy</b>.</li></ol> <p>No matter where the <b>injury</b>, <b>illness</b> or <b>clinical signs</b> were noticed or happened in, or on, <b>your horse's</b> body. This is in addition to any exclusion(s) stated on <b>your</b> Certificate of Insurance Horse Details.</p>
<b>Riding:</b>	Riding, driving, leading, mounting, dismounting and handling <b>your horse</b> .
<b>Replacement value:</b>	The price generally paid for new <b>saddlery and tack</b> of the same brand, make and type as the <b>saddlery and tack</b> that has been stolen, destroyed or damaged beyond repair.

## Definitions *(continued)*

<b>Saddlery and tack:</b>	Saddles, bridles, leathers, irons, harnesses, rugs and riding tack normally used on <b>your horse</b> while it is being used for the activities shown on <b>your</b> Certificate of Insurance Horse Details.
<b>Specialist farriery:</b>	Corrective, remedial, therapeutic and/or surgical farriery.
<b>Sum insured:</b>	The amount <b>you</b> have chosen and <b>we</b> have accepted as the most <b>we</b> will pay.
<b>UK:</b>	The United Kingdom, the Isle of Man and the Channel Islands.
<b>Vet:</b>	Registered Veterinary Surgeon.
<b>Veterinary fees:</b>	The amount <b>vets</b> in general or referral practices usually charge.
<b>Veterinary treatment:</b>	The cost of the following when required to treat <b>illness</b> and <b>injury</b> : <ol style="list-style-type: none"><li>1. Any consultation, examination, advice, test, x-ray, scan, surgery and nursing carried out by a <b>vet</b>, a veterinary nurse or another member of the veterinary practice under the supervision of a <b>vet</b>, and</li><li>2. Any medication legally prescribed by a <b>vet</b>.</li></ol>
<b>We, us, our:</b>	Allianz Insurance plc.
<b>Your horse:</b>	The horse named on <b>your</b> Certificate of Insurance Horse Details.
<b>Your horse-drawn vehicle or horse trailer:</b>	The horse-drawn vehicle or horse trailer described on <b>your</b> Certificate of Insurance Trailer Details.
<b>Your policy:</b>	<b>Your</b> application, <b>your Certificates of Insurance</b> and these Terms and Conditions.
<b>Your vet:</b>	The <b>vet</b> or veterinary practice <b>you</b> employ to carry out <b>your horse's</b> treatment.
<b>You, your:</b>	The person(s) named as the policyholder on <b>your</b> Certificate of Insurance Policy Details.

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

1. If **you** do not keep to the conditions, including the special conditions, **we** may cancel **your policy**, refuse a claim and/or withdraw from any current claim.
2. **You** must tell **us** as soon as possible if anything happens which could lead to a claim.
3. **You** must take proper care and keep in good condition all property covered by **your policy** and take all reasonable precautions to prevent accidents, **injury**, loss, theft and damage.
4. Throughout the **policy year you** must take proper care of **your horse** and take all reasonable steps to maintain **your horse's** health.
5. **You** must arrange and pay for **your horse** to have an annual dental examination and any treatment normally recommended by a **vet** to prevent **injury** or **illness**. Any treatment recommended as a result of the dental examination must be carried out as soon as possible.
6. **You** must keep **your horse** vaccinated against tetanus and flu and wormed as regularly as normally recommended by a **vet**. If **you** do not keep **your horse** vaccinated and wormed, **we** will not pay any claims that result from any **illness** that would not have occurred if **your horse** had been vaccinated or wormed.
7. **You** and **your horse** must live in the **UK**.

## General conditions that apply to all sections of your policy *(continued)*

8. If **your horse** is on **loan to you**:
  - Once **your** application is finalised **we** will write to the owner of the horse. **We** will confirm the cover that is in place and advise any claims settlement for Death, Theft or Straying or Permanent Loss of Use will be paid directly to **you**, regardless of any arrangements stated in the loan agreement.
  - If **you** submit a claim for Death, Theft or Straying or Permanent Loss of Use, **we** will write to the owner of the horse to advise the claim has been submitted.
9. If there is any other insurance under which **you** are entitled to make a claim, if the claim is payable **we** will only pay **our** share of the claim. **You** must tell **us** the name and address of the other insurance company and **your policy** number with them.
10. If **you** have any legal rights against another person in relation to **your** claim, **we** may take legal action against them in **your** name at **our** expense. **You** must give **us** all the help **you** can and provide any documents **we** ask for.
11. Regardless of **your** claims history, at renewal **we** have the right to amend **your policy** Terms and Conditions. This includes:
  - Imposing terms such as the application of **excesses**,
  - Increasing **your** premium,
  - Excluding cover,
  - Amending the policy wording, and/or
  - Changing **your** payment type.

**We** also have the right to not invite renewal. **We** will notify **you** in writing of any such action.
12. If **you** pay **your** premium by Direct Debit instalment, when **your policy** is due for renewal **we** will renew it for **you** automatically to save **you** having to contact **us** before the renewal date. **We** will write to **you** before the policy expires with full details of **your** premium and policy conditions for the next **policy year**. If **you** do not want to renew this policy, all **you** need to do is call **us** on 0845 070 1063 to let **us** know. Should **we** decide that **we** will not renew **your policy** **we** will notify **you** in writing before the renewal date. The automatic renewal process only applies if premium is paid by Direct Debit instalment.
13. If, after **we** offer to renew **your policy**, **you** tell **us** about something that happened during an earlier **policy year** which could lead to a claim, **we** may change the standard premium and Terms and Conditions and add exclusions backdated to the date **your policy** renewed.
14. **Your horse** is only covered under this policy if **you** pay the premium.
  - If **you** pay the yearly premium in instalments and **you** miss an instalment, **you** will have to pay the outstanding amount within 10 days of the date the instalment was due to be paid. If **we** do not receive **your** payment within 10 days of the date the premium was due, **your** insurance will automatically stop and **we** will make no further claim payments.
  - If **your policy** is cancelled or comes to an end for any other reason all cover will stop on the date the policy is cancelled/ends and no further claims will be paid.
15. When **you** claim **you** agree to provide **us** with any information connected with the claim **we** may reasonably ask for, including details of **your horse's** history. If there is a charge for this, **you** must pay the charge.
16. **You** agree that any **vet** has **your** permission to release any information **we** ask for about **your horse**. If the **vet** makes a charge for this, **you** must pay the charge.
17. **You** must make sure anyone **riding your horse** has the experience to ride it and is able to ride it. They must only use **your horse** for the activities listed in the **class of use** **you** have chosen, which are shown on **your** Certificate of Insurance Horse Details.
18. **You** must, at all times, insure **your horse** for all the activities that it will be used, or trained to be used, for. **You** can reduce **your horse's class of use** at renewal and increase at any time.

## General conditions that apply to all sections of your policy *(continued)*

19. **You** must, at all times, insure **your horse** for its current **market value**. It is **your** responsibility to ensure the **sum insured you** have chosen, and **we** have agreed, for **your horse** is kept up to date on **your policy**. **You** must review the **sum insured** on a regular basis to ensure it accurately reflects the **market value** of **your horse**. In the event of **your horse's** death **we** will pay the **market value** of **your horse** (or the **sum insured**, whichever is less). If the **market value** at the time of death is lower than the **sum insured** shown on **your** Certificate of Insurance Horse Details, **we** will only pay the **market value** and **we** will not provide any refund of premium.
20. When **we** settle **your** claim, **we** will deduct from the claim any amount due to **us**.
21. If **we** agree for a claim payment to be paid directly to **your vet** and **you** allow this, then if the **vet**, who has treated **your horse** or is about to treat **your horse**, asks for information about **your** insurance that relates to a claim, **we** will tell the **vet** what the insurance covers, what **we** will not pay, how the amount **we** pay is calculated and if the premiums are paid to date.
22. If **we** receive a request to pay the claim payment direct to a veterinary practice or referral centre, **we** reserve the right to decline this request.
23. If the **veterinary fees you** are charged are higher than the fees usually charged by a general or referral practice, **we** reserve the right to request a second opinion from a **vet** that **we** choose. If the **vet we** choose does not agree with the **veterinary fees** charged **we** may decide to pay only the **veterinary fees** usually charged by a general or referral practice in a similar area.
24. If **we** consider the **veterinary treatment** or **alternative therapy your horse** receives may not be required or may be excessive when compared with the treatment that is normally recommended to treat the same **illness** or **injury** by general or referral practices, **we** reserve the right to request a second opinion from a **vet** that **we** choose. If the **vet we** choose does not agree with the **veterinary treatment** or **alternative therapy** provided **we** may decide to pay only the cost of the **veterinary treatment** or **alternative therapy** that was necessary to treat the **injury** or **illness**, as advised by the **vet** from whom **we** have requested the second opinion.
25. If **you** decide to take **your horse** to a different **vet** for a second opinion because **you** are unhappy with the diagnosis or treatment provided, **you** must tell **us** before **you** arrange an appointment with the new **vet**. If **you** do not, **we** will not pay any costs relating to the second opinion. If **we** request, **you** must use a **vet we** choose. If **we** decide the diagnosis or treatment currently being provided is correct, **we** will not cover any costs relating to the second opinion.
26. It is **your** responsibility to ensure the veterinary practice is paid within the required time frame.
  - If an additional charge is added to the cost of treatment due to the late payment of fees, **we** will deduct this charge from the claim settlement.
  - If the veterinary practice provides a discount for paying the cost of treatment within a certain time frame, **you** must provide payment to the veterinary practice within this time frame. If **you** do not, **we** will deduct the discount, which would have been provided, from the claim settlement.
27. English law applies to this insurance contract.
28. Unless **we** agree otherwise the language of the policy and all communications relating to it will be in English.
29. **We** will not guarantee on the phone if **we** will pay a claim. **You** must send **us** a claim form that has been fully completed and **we** will then write to **you** with **our** decision.

## Cover

If **you** have paid the premium, **we** will provide cover for the policy sections and activities listed on the **Certificates of Insurance**. The cover applies in the **UK**.

If **you** take out **your policy** when **your horse** is outside the **UK your policy** will start when **your horse** enters the **UK**.

## Section 1A - Death of your horse (Injury or Illness)

### What we will pay

The **market value** of **your horse** following:

- Death as a result of an **injury** or **illness** that happened or first showed **clinical signs** during the **policy year**, or
- Euthanasia as a result of an **injury** or **illness** that happened or first showed **clinical signs** during the **policy year** and which meets the current British Equine Veterinary Association (BEVA) Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy.

### What we will not pay

1. Any amount if **your horse's** condition does not meet the current BEVA Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy.
2. More than the **sum insured**.
3. Any amount if the death or euthanasia happens more than **12 months** after the date the **injury** happened or the first **clinical signs** of the **illness** were noticed, that led to the death or euthanasia.
4. Any amount if **your vet** or **our vet** believes the **illness** or **injury your horse** is suffering from can be treated.
5. Any amount if **your vet** or **our vet** believes it is humane to keep **your horse** alive.
6. Any amount if the euthanasia of **your horse** is carried out before **you** tell **us** about **your** or **your vet's** decision for euthanasia, unless **your vet** believes there was no time for **you** to tell **us** because **your horse** was in so much pain that it needed immediate euthanasia.
7. Any amount if the death or euthanasia of **your horse** results from a **pre-existing condition**.
8. Any amount if the death or euthanasia of **your horse** results from an **illness which starts in the first 14 days of cover or during injury only temporary cover**.
9. Any amount if **you**, an **immediate family** member, anyone living with **you**, anyone working for **you** or anyone looking after **your horse**, deliberately caused the death or euthanasia of **your horse**.
10. Any amount if the death or euthanasia of **your horse** results from medication unless it was given by a **vet** or under the direction of a **vet**.
11. Any amount if the death or euthanasia of **your horse** results from a vice or from **your horse's** behaviour.
12. Any amount if the death or euthanasia of **your horse** results from breeding, abortion, pregnancy or foaling, unless it is caused by a complication of pregnancy or giving birth.
13. Any amount for the death of a mare's unborn foal, embryo or foetus.
14. Any other financial loss, legal compensation, costs and expenses that result from the death or euthanasia of **your horse**.
15. The cost of a post-mortem examination.
16. Any amount if the death or euthanasia of **your horse** results from an **injury** or an **illness** while taking part in an activity not shown as covered on **your** Certificate of Insurance Horse Details.
17. Any amount if a claim has not been submitted within 12 months of **your horse's** death.
18. Any amount if **your horse** is covered under Section 1B Death of your horse (Injury only - Mature Horse). Please refer to Section 1B where the details of **your** injury only cover can be found.

**Special Conditions apply to this section. Please see 'Special conditions that apply to Section 1A Death of your horse (Injury or Illness) and Section 1B Death of your horse (Injury Only - Mature Horse)'.**

## Section 1B - Death of your horse (Injury Only - Mature Horse)

### What we will pay

The **market value** of **your horse** following:

- Death as a result of an **injury** that happened or first showed **clinical signs** during the **policy year**, or
- Euthanasia as a result of an **injury** that happened during the **policy year** and which meets the current British Equine Veterinary Association (BEVA) Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy.

### What we will not pay

1. Any amount if **your horse's** condition does not meet the current BEVA Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy.
2. More than the **sum insured**.
3. Any amount if the death or euthanasia of **your horse** happened more than **12 months** after the date of the **injury** that caused the death or euthanasia.
4. Any amount if **your vet** or **our vet** believes the **injury your horse** is suffering from can be treated.
5. Any amount if **your vet** or **our vet** believes it is humane to keep **your horse** alive.
6. Any amount if the euthanasia of **your horse** is carried out before **you** tell **us** about **your** or **your vet's** decision for euthanasia, unless **your vet** believes there was no time for **you** to tell **us** because **your horse** was in so much pain that it needed immediate euthanasia.
7. Any amount if the death or euthanasia of **your horse** results from a **pre-existing condition**.
8. Any amount if **you**, an **immediate family** member, anyone living with **you**, anyone working for **you** or anyone looking after **your horse**, deliberately cause the death or euthanasia.
9. Any amount if the death or euthanasia of **your horse** results from breeding, abortion, pregnancy or foaling, unless it is caused by a complication of pregnancy or giving birth.
10. Any amount for the death of a mare's unborn foal, embryo or foetus.
11. Any other financial loss, legal compensation, costs and expenses that result from the death or euthanasia of **your horse**.
12. The cost of a post-mortem examination.
13. Any amount if the death or euthanasia of **your horse** results from an **injury** that happened while taking part in an activity not shown as covered on **your** Certificate of Insurance Horse Details.
14. Any amount if a claim has not been submitted within 12 months of **your horse's** death.

### Special conditions that apply to Section 1A Death of your horse (Injury or Illness) and Section 1B Death of your horse (Injury Only - Mature Horse)

1. **You** must tell **us** as soon as possible if **your horse** shows any **clinical signs** of an **injury** or an **illness**.
2. If **you** or **your vet** decide on the euthanasia of **your horse**, **you** must tell **us** immediately.
3. If **your horse** is euthanased, to make a claim under this benefit **your horse's** condition must have met the BEVA Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy. Before euthanasia takes place **you** must ask **your vet** if **your horse's** condition meets the criteria to understand if **you** are able to submit a claim under this insurance.
4. If **your vet** and **our vet** do not agree that the **illness** or **injury your horse** is suffering from can be treated, or that it is humane to keep **your horse** alive, **we** may employ another specialist **vet**, who **you** agree **we** can employ. The specialist **vet** will examine **your horse** and all parties will accept this **vet's** opinion.
5. The period of **12 months** will always start from the date in the **policy year**:
  - The **injury** first happened,
  - The **illness** or **clinical signs** were first noticed, or
  - An **illness** with the same diagnosis or **clinical signs** as the **illness** or **clinical signs** that caused the death or euthanasia, was first noticed,No matter how many times the same **injury, illness** or **clinical signs** are noticed in, or on, any part of **your horse's** body.

6. If a number of **injuries, illnesses or clinical signs** are diagnosed as one **injury or illness**, or it is found that they are caused by, or relate to, another **injury or illness**, the period of **12 months** will start from the date in the **policy year** that the first **injury** happened or the first **clinical signs** of any of the **illnesses** were noticed.
7. **You** must immediately arrange, at **your** own expense, for a **vet** to examine and treat **your horse** if it shows **clinical signs** of an **injury** or an **illness**, and follow any advice they give. If **you** do not follow the **vet's** advice **we** will not pay any claims relating to that **injury or illness**.
8. **We** may refer **your horse's** case history to a **vet** that **we** choose and if **we** request, **you** must arrange for **your horse** to be examined by this **vet**.
9. If **we** pay a claim under Section 1A Death of your horse (Injury or Illness) or 1B Death of your horse (Injury Only - Mature Horse) **your horse** will be cancelled from **your** insurance the day after **your horse's** death.
10. Following the death or euthanasia of **your horse**, unless **you** have spoken to **us** and **we** have advised it is not necessary, **you** must arrange, at **your** expense, for a post-mortem examination to be carried out and a report produced.
11. **We** will not make any claim payment until **we** receive evidence of **your** legal ownership of the horse.
12. If **your horse** is on **loan to you**, **we** will not make any claim payment until **we** receive evidence of the horse's legal ownership and a copy of the loan agreement, signed by both parties. The claims settlement will be paid to **you** and not to the horse's legal owner, regardless of any arrangements stated in the loan agreement.
13. If **your horse** is covered under Section 1A Death of your horse (Injury or Illness), at the renewal following **your horse's** 20th birthday, this section will automatically change to Section 1B Death of your horse (Injury only - Mature Horse) and all cover for **illness** will stop.

## Section 2 - Loss by Theft or Straying

### What we will pay

If **your horse** is stolen or goes missing during the **policy year**, **we** will pay:

- The **market value** of **your horse** if it is not found or does not return, and
- The cost of advertising to try and find **your horse** and the reward **you** have paid when **your horse** is found.

### What we will not pay

1. More than the **sum insured**.
2. More than £300 for the cost of advertising and the reward **you** have paid.
3. Any amount if **you** or the person looking after **your horse** has freely parted with it, even if tricked into doing so, unless the person was looking after or transporting **your horse** in return for money, goods or services.
4. Any amount for the death of an unborn foal, embryo or foetus.
5. Any amount if the theft or loss of **your horse** involves **your** employee's dishonesty.
6. Any reward paid to a member of **your immediate family**, the person who has **your horse** on **loan** or any person living with **you** or employed by **you**.
7. Any other financial loss, legal compensation, costs and expenses as a result of the theft or straying of **your horse**.
8. Any amount if a claim has not been submitted within 12 months of **your horse** going missing or being stolen.

### Special conditions that apply to this section

1. **You** must notify the police as soon as **you** discover **your horse** is missing.
2. **We** will not make any claim payment until **we** receive evidence of **your** legal ownership of the horse.
3. If **your horse** is on **loan to you**, **we** will not make any claim payment until **we** receive evidence of the horse's legal ownership and a copy of the loan agreement, signed by both parties. The claims settlement will be paid to **you** and not to the horse's legal owner, regardless of any arrangements stated in the loan agreement.
4. If **your horse** is found or returns, **you** must immediately repay the amount **we** have paid **you** for **your horse**.
5. If **we** pay a claim under this section, **your horse** will be cancelled from **your** insurance from the day **your horse** went missing.

## Section 3A - Veterinary Fees (Injury and Illness)

### What we will pay

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

Each **illness** and **injury** is covered for:

- **12 months**, starting from the date during the **policy year** the **injury** happened or the **clinical signs** of the **illness** were first noticed, or
- Until the **maximum benefit** is reached,

Whichever happens first.

### What you pay

The **excess** shown on **your** Certificate of Insurance Horse Details.

### What we will not pay

1. More than the **maximum benefit** for each **injury** or **illness**, that is not related to any other **injury** or **illness**.
2. The cost of any **veterinary treatment your horse** receives more than **12 months** after the date the **injury** happened or the **illness** first showed **clinical signs**.
3. The cost of any medicines or materials prescribed or supplied to be used more than **12 months** after the date the **injury** happened or the **illness** first showed **clinical signs**.
4. The cost of any **veterinary treatment** for a **pre-existing condition**.
5. The cost of any **veterinary treatment** for an **illness which starts in the first 14 days of cover or during injury only temporary cover**.
6. The cost of any **veterinary treatment** to prevent **injury** or **illness**.
7. The cost of any **elective treatment, diagnostic or procedure** or any **veterinary treatment** that **you** choose to have carried out that is not required to treat an **injury** or **illness**, including any complications that arise.
8. The cost of any **veterinary treatment** that results from a vice or from **your horse's** behaviour.
9. The cost of vaccinations, castration and the removal of wolf teeth, except the cost of treating any complications caused by these procedures.
10. The cost of any **veterinary treatment** for breeding, abortion, pregnancy or foaling, except the cost of treating any complications caused by these procedures.
11. The cost of any **veterinary treatment** for any **injury** or **illness** deliberately caused by **you**, a member of **your immediate family** or the person who has **your horse** on **loan**.
12. The cost of euthanasia, cremation, burial or disposal of **your horse**.
13. The cost of a post-mortem examination.
14. The cost of buying or hiring equipment or machinery.
15. The cost of acupuncture, chiropractic manipulation, feed supplements, herbal medicine, homeopathy, nutraceuticals, osteopathy, physiotherapy, **specialist farriery**, hydrotherapy or any other alternative or complementary treatment. This includes any **veterinary treatment** specifically needed to carry out the particular alternative or complementary treatment. Please refer to Section 4 Alternative Therapies where details of cover for these types of treatment can be found.
16. The cost of treatment, which is not **veterinary treatment** that **you** could carry out yourself, unless the **vet** confirms that a **vet** or a member of a veterinary practice must carry this out, regardless of **your** personal circumstances. This includes the use of horse-walkers.
17. Any costs for livery charges and transporting **your horse** to or from its place of **veterinary treatment**. Please refer to Section 5 Non-Veterinary Fees where details of this cover can be found.
18. The cost of any **veterinary treatment** that results from an **injury** or an **illness** while taking part in an activity not shown as covered on **your** Certificate of Insurance Horse Details.
19. The cost of any **veterinary treatment** that **your vet** and **our vet** do not agree on, if **we** have advised **you** that this agreement is required.
20. The cost of any **veterinary treatment** if a claim has not been submitted within 12 months of the date treatment was carried out or medicine provided.
21. The cost of any **veterinary treatment** if **your horse** is covered under Section 3B Veterinary Fees (Injury only - Mature Horse). Please refer to Section 3B where the details of **your injury** only cover can be found.

**Special conditions apply to this section. Please see 'Special conditions that apply to Section 3A Veterinary Fees (Injury and Illness) and Section 3B Veterinary Fees (Injury Only - Mature Horse)'.**

## Section 3B - Veterinary Fees (Injury Only - Mature Horse)

### What we will pay

The cost of **veterinary treatment your horse** has received during the **policy year** to treat **injury**.

Each **injury** is covered for:

- **12 months**, starting from the date during the **policy year** the **injury** happened, or
- Until the **maximum benefit** is reached,

Whichever happens first.

### What you pay

The excess shown on your Certificate of Insurance Horse Details.

### What we will not pay

1. More than the **maximum benefit** for each **injury** that is not related to any other **injury**.
2. The cost of any **veterinary treatment your horse** receives more than **12 months** after the date the **injury** happened.
3. The cost of any medicines or materials prescribed or supplied to be used more than **12 months** after the date the **injury** happened.
4. The cost of any **veterinary treatment** for a **pre-existing condition**.
5. The cost of any **veterinary treatment** to prevent **injury**.
6. The cost of any **elective treatment, diagnostic or procedure** or **veterinary treatment** that **you** choose to have carried out that is not required to treat an **injury**, including any complications that arise.
7. The cost of any **veterinary treatment** for any **injury** deliberately caused by **you**, a member of **your immediate family** or the person who has **your horse on loan**.
8. The cost of euthanasia, cremation, burial or disposal of **your horse**.
9. The cost of a post-mortem examination.
10. The cost of buying or hiring equipment or machinery.
11. The cost of acupuncture, chiropractic manipulation, feed supplements, herbal medicine, homeopathy, nutraceuticals, osteopathy, physiotherapy, **specialist farriery**, hydrotherapy or any other alternative or complementary treatment. This includes any **veterinary treatment** specifically needed to carry out the particular alternative or complementary treatment. Please refer to Section 4 Alternative Therapies where details of cover for these types of treatment can be found.
12. The cost of treatment, which is not **veterinary treatment** that **you** could carry out yourself, unless the **vet** confirms that a **vet** or a member of a veterinary practice must carry this out, regardless of **your** personal circumstances. This includes the use of horse-walkers.
13. Any costs for livery charges and transporting **your horse** to or from its place of **veterinary treatment**. Please refer to Section 5 Non-Veterinary Fees where details of this cover can be found.
14. The cost of any **veterinary treatment** that results from an **injury** that happened while taking part in an activity not shown as covered on **your** Certificate of Insurance Horse Details.
15. The cost of any **veterinary treatment** that **your vet** and **our vet** do not agree on, if **we** have advised **you** that this agreement is required.
16. The cost of any **veterinary treatment** if a claim has not been submitted within 12 months of the date treatment was carried out or medicine provided.

### Special conditions that apply to Section 3A Veterinary Fees (Injury and Illness) and Section 3B Veterinary Fees (Injury Only - Mature Horse)

1. **You** must immediately arrange, at **your** own expense, for a **vet** to examine and treat **your horse** if it shows **clinical signs** of an **injury** or an **illness**, and follow any advice they give. If **you** do not follow the **vet's** advice **we** will not pay any claims relating to that **injury** or **illness**.
2. **We** may refer **your horse's** case history to a **vet** that **we** choose and if **we** request, **you** must arrange for **your horse** to be examined by this **vet**.

### Special conditions that apply to Section 3A Veterinary Fees (Injury and Illness) and Section 3B Veterinary Fees (Injury Only - Mature Horse) *(continued)*

3. **You** must tell **us** as soon as possible if **your horse** shows any **clinical signs** of an **injury** or an **illness**.
4. **We** may decide that **we** need **our vet** to agree **your horse's veterinary treatment** with **your vet** before it is carried out. **We** will advise **you** if this agreement is required.
5. If **your vet** and **our vet** do not agree on the **veterinary treatment** for **your horse** **we** may employ another specialist **vet**, who **you** agree **we** can employ. The specialist **vet** will examine **your horse** and all parties will accept this **vet's** opinion of the **veterinary treatment** **your horse** needs.
6. The maximum amount **we** will pay for the cost of **veterinary treatment** for each **illness** and **injury** is the **maximum benefit** that applies on the date the **injury** happened or the date the **clinical signs** of the **illness** were first noticed.
7. The period of **12 months** and the **maximum benefit** will always start or be calculated from the date in the **policy year**:
  - The **injury** first happened,
  - The **illness** or **clinical signs** were first noticed, or
  - An **illness** with the same diagnosis or **clinical signs** was first noticed,No matter how many times the same **illness** or the same **clinical signs** are noticed in, or on, any part of **your horse's** body.
8. If a number of **injuries**, **illnesses** or **clinical signs** are diagnosed as one **injury** or **illness**, or it is found that they are caused by, or relate to, another **injury** or **illness**, the period of **12 months** and the maximum benefit will start or be calculated from the date in the **policy year** that the first **injury** happened or the first **clinical signs** of any of the **illnesses** were noticed.
9. **We** will only pay for items which have not been purchased from the veterinary practice if the **vet** confirms:
  - The items are required to treat the **illness** or **injury**, and
  - The quantities that are needed to treat the **illness** or **injury**.
10. If **your horse** is covered under Section 3A Veterinary Fees (Injury and Illness), at the renewal following **your horse's** 20th birthday, this section will automatically change to Section 3B Veterinary Fees (Injury only - Mature Horse) and all cover for **illness** will stop.

## Section 4 - Alternative Therapies

### What we will pay

The cost of **alternative therapies** **your horse** receives during the **policy year** to treat **illness** and **injury**, provided they have been recommended by a **vet**.

### What we will not pay

1. More than the **maximum benefit** for the combined treatment costs of all **illnesses** and **injuries** in the **policy year**.
2. Any amount if **you** do not have Section 3A Veterinary Fees (Injury and Illness) or Section 3B Veterinary Fees (Injury Only - Mature Horse) shown as covered on **your** Certificate of Insurance Horse Details.
3. Any amount for an **illness** if **your horse** is covered under Section 3B Veterinary Fees (Injury Only - Mature Horse).
4. Any amount if the **injury** or **illness** the **alternative therapy** is treating is not coverable under the Veterinary Fees section of cover **you** have on this policy. Please see Section 3A Veterinary Fees (Injury and Illness) and 3B Veterinary Fees (Injury Only - Mature Horse) and refer to **your** Certificate of Insurance Horse Details.
5. The amount **you** normally pay for shoeing and/or the care of **your horse's** feet.
6. The cost of any **alternative therapies** if a claim has not been submitted within 12 months of the date treatment was carried out or provided.

## Section 5 - Non-Veterinary Fees

### What we will pay

The cost of:

- Transportation costs to, and from, a veterinary college or hospital, and
- Livery charges at a veterinary college or hospital,

Where **your horse** has been referred for a second opinion or specialist treatment for an **injury** that happened or an **illness** that first showed **clinical signs** during the **policy year**.

### What we will not pay

1. More than the **maximum benefit** for all livery and transportation costs in the **policy year**.
2. Any amount if **you** do not have Section 3A Veterinary Fees (Injury and Illness) or Section 3B Veterinary Fees (Injury Only - Mature Horse) shown as covered on **your** Certificate of Insurance Horse Details.
3. Any amount if the transportation or livery relates to an **illness** if **your horse** is covered under Section 3B Veterinary Fees (Injury Only - Mature Horse).
4. Any amount if the transportation or livery relates to an **illness** or **injury** that is not coverable under the Veterinary Fees section of cover **you** have on this policy. Please see Section 3A Veterinary Fees (Injury and Illness) and Section 3B Veterinary Fees (Injury Only - Mature Horse) and refer to **your** Certificate of Insurance Horse Details.
5. Any amount unless **your vet** has referred **your horse** for a second opinion or specialist treatment.
6. Any amount if a claim has not been submitted within 12 months of the date of **your horse's** visit to the veterinary college or hospital.

### Special condition that applies to this section

1. If **you** are claiming for livery charges, the amount **you** usually pay for livery will be deducted from the claim payment.

## Section 6 - Disposal

### What we will pay

The cost to remove and dispose of **your horse's** body, following death or euthanasia, as a result of an **injury** that happens or an **illness** that first shows **clinical signs** during the **policy year**.

### What we will not pay

1. More than the **maximum benefit**.
2. Any amount if **you** do not have Section 1A Death of your horse (Injury or Illness) or Section 1B Death of your horse (Injury Only - Mature Horse) shown as covered on **your** Certificate of Insurance Horse Details.
3. Any amount if the death or euthanasia of **your horse** is not covered under Section 1A Death of your horse (Injury or Illness) or Section 1B Death of your horse (Injury Only - Mature Horse).
4. Any amount following death due to an **illness** if **your horse** is covered under Section 1B Death of your horse (Injury Only - Mature Horse).
5. Any amount if a claim has not been submitted within 12 months of **your horse's** death.

## Section 7 - Permanent Loss of Use

### What we will pay

The **market value of your horse** if an **injury** happens or an **illness** first shows **clinical signs** during the **policy year**, and it results in **your horse** never being able to take part in any one of the activities shown on **your** Certificate of Insurance Horse Details.

### What we will not pay

1. More than the percentage of the **sum insured** as shown on **your** Certificate of Insurance Horse Details.
2. Any amount if the permanent loss of use happens more than **12 months** after the date the **injury** happened or the **illness** first showed **clinical signs**.
3. Any amount if **your vet** and **our vet** do not agree that **your horse** will never be able to take part in any one of the activities shown on **your** Certificate of Insurance Horse Details.
4. Any amount for permanent loss of use caused by a **pre-existing condition**.
5. Any amount for permanent loss of use caused by an **illness which starts in the first 14 days or during injury only temporary cover**.
6. Any amount if **your horse** has never taken part in, or been trained to do, the activity it now cannot participate in.
7. Any amount if the **injury** or **illness** results from an activity not shown as covered on **your** Certificate of Insurance Horse Details.
8. Any amount if **your horse** cannot breed if this is caused by something that is not an **illness** or **injury**.
9. Any amount if **your horse** is under 2 years of age or 15 years old or over at the beginning of the **policy year** as shown on **your** Certificate of Insurance Horse Details.
10. Any amount if the permanent loss of use of **your horse** results from a vice or its behaviour.
11. Any amount if **your horse** is not allowed to take part in any competition because of any blemish or scar or any regulations about horses that have had a Hobday operation or any other operation for a respiratory system disorder.
12. Any amount for permanent loss of use unless the **illness** or **injury** prevents **your horse** from physically taking part in an activity.

### Special conditions that apply to this section

1. Permanent loss of use cover will be automatically removed from **your policy** at the renewal following **your horse's** 15th birthday.
2. **You** must immediately arrange, at **your** own expense, for a **vet** to examine and treat **your horse** if it shows **clinical signs** of an **injury** or an **illness**, and follow any advice they give. If **you** do not follow the **vet's** advice **we** will not pay any claims relating to that **injury** or **illness**.
3. If it is **your vet's** opinion that **your horse** will never be able to take part in any one of the activities shown on **your** Certificate of Insurance Horse Details **you** must send **us** a report from **your vet** giving details of **your horse's illness** or **injury** and their reasons for the opinion.
4. **We** need **our vet** to agree with **your vet** that **your horse** will never be able to take part in any one of the activities shown on **your** Certificate of Insurance Horse Details.
5. If **your vet** and **our vet** do not agree that **your horse** will never be able to take part in any one of the activities shown on **your** Certificate of Insurance Horse Details, **we** may employ another specialist **vet**, who **you** agree **we** can employ. The specialist **vet** will examine **your horse** and all parties will accept this **vet's** opinion.
6. The period of **12 months** will always start from the date in the **policy year**:
  - The **injury** first happened,
  - The **illness** or **clinical signs** were first noticed, or
  - An **illness** with the same diagnosis or **clinical signs** as the **illness** or **clinical signs** that caused the permanent loss of use were first noticed,No matter how many times the same **illness** or the same **clinical signs** are noticed in, or on, any part of **your horse's** body.

## Section 7 - Permanent Loss of Use (continued)

7. If a number of **injuries, illnesses or clinical signs** are diagnosed as one **injury or illness**, or it is found that they are caused by, or relate to another **injury or illness**, the period of **12 months** will start from the date in the **policy year** that the first **injury** happened or the first **clinical signs** of any of the **illnesses** were noticed.
8. **We** will not make any claim payment until **we** receive evidence of **your** legal ownership of the horse.
9. If **your horse** is on **loan to you**, **we** will not make any claim payment until **we** receive evidence of the horse's legal ownership and a copy of the loan agreement, signed by both parties. The claims settlement will be paid to **you** and not to the horse's legal owner, regardless of any arrangements stated in the loan agreement.
10. If **your horse** can still be ridden or used for breeding **we** will reduce the amount **we** will pay to 60% of the selected percentage. This means that if **you** have chosen permanent loss of use at:
  - 100%, **we** will pay 60%,
  - 75%, **we** will pay 45%, or
  - 50%, **we** will pay 30%,Of the **market value** (or **sum insured**, whichever is less) of **your horse**.
11. Once **we** have agreed the settlement of **your** claim, **you** agree to have the loss of use freeze mark placed on **your horse** at **your** expense. Any costs relating to the freeze mark will be deducted from the claim settlement. **We** will not make any claim payment until **we** have received confirmation the freeze mark has been carried out.
12. If **you** have decided to euthanase **your horse**, **we** will not make any claim payment until **we** have veterinary confirmation that the horse has been euthanased.
13. If **we** pay a claim for loss of use **your horse** will continue to belong to **you**.
14. If **your horse** is covered for 100% of the **sum insured**, **we** will deduct the **market value** at the time of payment, from the claims settlement.
15. If **we** pay a claim under this section, **your horse** will be cancelled from **your** insurance from the date of the cheque settling the claim.

## Section 8 - Saddlery and Tack

### What we will pay

If **your saddlery and tack** is stolen, damaged or destroyed during the **policy year**, **we** will pay:

- The cost of repairing the **saddlery and tack** if it is damaged to bring it back to the same condition it was in before it was damaged, or
- The **replacement value** of the **saddlery and tack** if the cost of repair is more than it was worth or it is stolen or destroyed.

### What you pay

The first £100 for each incident where **saddlery and tack** is stolen, damaged or destroyed.

### What we will not pay

1. More than the **maximum benefit** for each incident.
2. More than £400 for any saddle or item of tack if **you** do not have:
  - Formal proof of purchase, which shows the make, model, purchase price and the date of purchase, or
  - A saddler's valuation, which shows the make, model and value of the item and the date the valuation was carried out.
3. Any amount for clothing or personal effects.
4. Any amount if the **saddlery and tack** is stolen when it is left unattended, unless it has been stolen from:
  - The locked boot or covered luggage area or any other specially designed covered area of a locked vehicle,
  - The house, bungalow, flat or other domestic building that **you** live in that has been locked with 5-lever mortice deadlocks, or equivalent locks on all doors, or
  - A building or part of a building that **you** do not live in that has been locked with 5-lever mortice deadlocks or equivalent locks on all doors and has steel bars or steel grids on all windows.

## Section 8 - Saddlery and Tack (continued)

- Any amount for stolen **saddlery and tack** unless there is proven forcible or violent entry to the premises or vehicle where the saddlery and tack was kept.
- Any amount for **saddlery and tack** you do not own, unless **you** are responsible for the **saddlery and tack** due to a contract **you** have entered into.
- Any amount if the **saddlery and tack** is damaged or destroyed by wear and tear or the actions of moths, insects, vermin, pests or any other cause that happens slowly.
- Any amount if the **saddlery and tack** is damaged when it is being cleaned, dyed, repaired or restored.
- Any amount if the **saddlery and tack** is being used by a riding establishment or by someone for professional lessons if they are not a member of **your immediate family** or the person who has **your horse on loan**.
- Any amount to have the **saddlery and tack** adjusted to fit **your horse**.
- Any amount if the **saddlery and tack** is stolen, damaged or destroyed as a result of any business activity, **your** profession, **your** occupation or while **you** are working for someone, whether **you** are paid or not.

### Special conditions that apply to this section

- If **you** have not insured **the saddlery and tack** you own for **your horse** for its full value **we** will only pay a percentage of **your** claim. The percentage **we** will pay will be based upon how much of the full value the amount **you** have insured **your saddlery and tack** for represents.
- The saddler's valuation must be carried out and submitted to **us** before the item is stolen, damaged or destroyed. If not, the amount **we** will pay for that item will be limited to £400.
- You** must notify the police as soon as **you** discover any of **your saddlery and tack** has been stolen or deliberately damaged.
- If your **saddlery and tack** is found, **you** must immediately repay the full amount **we** have paid **you**.

## Section 9 - Personal Accident

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

### What we will pay

If **you** are **riding your horse** and are injured, die or have to stay in hospital as a result of an accident that happens during the **policy year**, **we** will pay up to the amount stated in the List of Cover.

List of Cover	Maximum Benefit
1. Death	£10,000
2. Permanent blindness in one or both eyes	£10,000
3. Loss of one or more limbs 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.	£10,000
4. Permanent total disablement If, as a result of an accident, you will never be able to carry out any type of work.	£10,000
5. Hospital benefit For each 24 hours you are in hospital.	£15
6. Emergency dental treatment	£500

## Section 9 - Personal Accident *(continued)*

### What you pay

The first £100 for emergency dental treatment.

### What we will not pay

1. More than one of the items of cover, 1 to 4, as a result of one accident.
2. Any amount if **you** death happens more than 24 months after the date **you** were injured.
3. Any amount for permanent total disability until at least 52 weeks after the date of the accident.
4. More than 10 days' hospital benefit for each accident.
5. Any amount if **you** are under 5 years old or over 75 years old.
6. Any amount if someone is **riding your horse** for professional lessons or **riding** at a riding establishment unless that person is a member of **your immediate family** or the person has **your horse on loan**.
7. Any amount if the incident or injury that takes place is a result of any business activity, **your** profession, **your** occupation or while **you** are working for someone, whether **you** are paid or not.
8. Any extra amount because of a medical condition, injury or illness **you** had before this cover started.
9. Any amount if the injury or death resulted from suicide, attempted suicide or **you** deliberately injuring yourself.
10. Any amount if the injury or death was caused because **you** deliberately put yourself in danger unless it was in an attempt to save someone's life.
11. Any amount if the injury or death results from **you** being under the influence of alcohol.
12. Any amount if the injury or death results from **you** taking a drug unless it was under proper medical supervision and not to treat any drug addiction.

### Special conditions that apply to this section

1. If **you** are injured **you** must get medical attention as soon as possible.
2. **You** agree that **we** may appoint and pay for **our** own medical advisers to examine **you** as often as necessary.
3. If **you** are over 65, **you** agree to provide **us** with a certificate of fitness to ride from a doctor if **we** ask for it. If the doctor makes a charge for this, **you** must pay the charge.
4. If **you** are not wearing approved protective headgear manufactured to BSEN1384, EN1384, PAS015, ASTM F1163 standard, carrying the BSI kitemark or be SEI certified at the time of the accident, **we** will not pay any amount resulting from a head injury.
5. If an injury is worse because of an old injury, physical disability or condition that **you** had before the accident, **we** will only pay a percentage of **your** claim. The percentage will be based on the amount the old injury, physical disability or condition affects or is part of a new injury.

## Section 10 - Personal Liability

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

### What we will 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-drawn vehicle or horse trailer** during the **policy year** and **you** are legally responsible, **we** will pay:

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

### What you pay

The first £100 of any compensation, costs and expenses for each incident where property has been damaged.

## Section 10 - Personal Liability *(continued)*

### What we will not pay

1. More than the **maximum benefit** for each incident.
2. Any costs and expenses for defending **you** that **we** have not agreed beforehand.
3. Any compensation, costs and expenses if **you** are legally responsible only because of a contract **you** have entered into.
4. Any compensation, costs and expenses for the death, injury or illness of an **immediate family** member, anyone who lives with **you** or is employed by **you**.
5. Any compensation, costs and expenses for property that belongs to an **immediate family** member or anyone who lives with **you** or is employed by **you**.
6. Any compensation, costs and expenses for property that **you**, an **immediate family** member, or anyone who lives with **you** or is employed by **you**, is responsible for.
7. Any compensation, costs and expenses if all or part of a fence, a wall, a gate or an agricultural crop is damaged while **you** are **riding your horse**.
8. Any compensation, costs and expenses if **your** horse trailer is attached to, or becomes detached from, a vehicle that needs third party cover under any road traffic law.
9. Any compensation, costs and expenses for a horse-drawn vehicle on the public highway if **your horse** is not drawing it.
10. Any compensation, costs and expenses if someone is **riding your horse** for professional lessons or **riding** at a riding establishment unless that person is a member of **your immediate family** or the person has **your horse on loan**.
11. Any compensation, costs and expenses if the incident results from the business activities of a riding establishment.
12. Any compensation, costs and expenses if the incident or injury that takes place is a result of any business activity, **your** profession, **your** occupation or while **you** are working for someone, whether **you** are paid or not.
13. Any compensation, costs and expenses if the person who is killed, injured or falls ill is being paid to ride or handle **your horse**.
14. Any compensation, costs and expenses if the person, who has been paid to ride or handle **your horse**, is negligent and this results in damage to property or the death, injury or illness of another person.
15. Any compensation, costs and expenses if the incident results from a stallion serving or attempting to serve a mare, or from any activity involving artificial insemination.
16. Any compensation, costs and expenses if **you** are responsible under the laws of any country, other than members of the European Union.
17. Any compensation, costs and expenses if **you** are 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 involving **your horse** or **your horse-drawn vehicle or horse trailer**.

### Special conditions that apply to this section

1. If a business (such as a livery yard) or a person (such as a pet sitter) is being paid to ride or care for **your horse**, it is **your** responsibility to:
  - Make sure the business/person has the appropriate insurance cover for third party liability, and
  - Tell them if **your horse** has any vices or behavioural problems or requires any special handling so they are able to handle **your horse** in an appropriate manner.
2. **You** must not admit responsibility, agree to pay any claim or negotiate with any other person following an incident.
3. **You** agree to tell **us** or help **us** find out all the circumstances of an incident that results in a claim, provide written statements and go to court if needed.
4. **You** must allow **us** to take charge of **your** claim and allow **us** to prosecute in **your** name for **our** benefit.
5. **You** must immediately send **us** any writ, summons or legal documents **you** receive and **you** must never send a reply to any of these documents.
6. **You** agree to provide **us** with any information connected with a claim **we** reasonably ask for, including details of **your horse's** history.

## Section 11 - Horse-Drawn Vehicles or Horse Trailers

### What we will pay

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

- The cost of repairing **your horse-drawn vehicle or horse trailer** if it is damaged to bring it back to the same condition it was in before it was damaged, or
- The **market value of your horse-drawn vehicle or horse trailer** if the cost of repair is more than it was worth or it is stolen or destroyed.

### What you pay

The first £100 for each incident where **your horse-drawn vehicle or horse trailer** is stolen, damaged or destroyed.

### What we will not pay

1. More than the **sum insured** for each incident.
2. More than **your horse-drawn vehicle or horse trailer** was worth at the time it was, stolen, damaged or destroyed.
3. Any amount unless **you** provide **us** with evidence of **your** legal ownership of **your horse-drawn vehicle or horse trailer**.
4. Any amount if **your horse-drawn vehicle or horse trailer** is damaged or destroyed by wear and tear or the actions of moths, insects, vermin, pests, mildew, mechanical or electrical breakdown, or any other cause that happens slowly.
5. Any amount if **your horse trailer or horse drawn-vehicle** is damaged or destroyed when it is being cleaned, repaired or restored.
6. Any extra costs if replacement parts or accessories are not available.
7. Any amount for tyres that are damaged by punctures, cuts, bursts or braking.
8. Any amount if **your** horse-drawn vehicle is damaged while it is being used for training for, or taking part in, competitions, trials or cross-country events.
9. Any amount if **your horse-drawn vehicle or horse trailer** is stolen, or damaged or destroyed while the thief is trying to steal it, if **you** have not fitted a wheel clamp, tow hitch lock or put it in a building that is properly locked.
10. Any other financial loss, legal compensation, costs or expenses.

### Special conditions that apply to this section

1. If **you** have not insured **your horse-drawn vehicle or horse trailer** for its full value **we** will only pay a percentage of **your** claim. The percentage **we** will pay will be based upon how much of the full value the amount **you** have insured **your horse-drawn vehicle or horse trailer** for represents.
2. If **your horse-drawn vehicle or horse trailer** is found, **you** must repay the full amount **we** have paid **you**.

## General Exclusions

### The policy does not cover the following:

1. Any horse less than 14 days old.
2. Any amount if the **injury, illness** or incident is shown as excluded on **your** Certificate of Insurance Horse Details.
3. Any amount caused by radiation, nuclear explosion, nuclear fallout or contamination by radioactivity.
4. Any loss as a result of an act of force or violence for political, religious or ideological reasons, war, riot, revolution or any similar event, including any chemical or biological terrorism.
5. Any amount caused by an act of terrorism, the use or threatened use of violence to scare or intimidate, malicious persons, civil disobedience, strikes, people taking part in labour disturbances or the involvement directly or indirectly of any unlawful organisation in Northern Ireland.
6. Any amount caused by the pressure waves of an aircraft, spacecraft or anything else travelling at sonic or supersonic speed.
7. Any legal expenses resulting from criminal proceedings because of a deliberate act by **you**.
8. Any fines or penalties.
9. Any amount which results from **you** acting or behaving unlawfully.
10. Any amount if **you** break the United Kingdom or Republic of Ireland laws or regulations, including those relating to animal health or importation.
11. Any amount resulting from diseases transmitted from animals to humans.
12. Any amount if **your horse** is confiscated or destroyed under the order of any government, public or local authority or any other authority.

## Fraud

Fraud increases **your** premium and the premiums of all policyholders. If **you**:

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

**We** will not pay **your** claim and **we** may void **your policy** and inform the authorities. If **we** pay a claim and subsequently find the claim was fraudulent, **you** must repay **us** the full amount.

## How we use your data

- Please be aware that telephone calls may be monitored and recorded.
- **Your** details will be stored on **our** computer system to administer **your policy** but will not be kept longer than necessary.
- **We** can only discuss **your** personal details with **you**. If **you** would like anyone else to act on **your** behalf please let **us** know.
- Unless **you** advise otherwise, **we** may use **your** details to support the development of **our** business by including them in customer surveys.
- **We** may share **your** details with other insurance companies, directly or through a number of databases. This allows **us** to check information **you** give **us** and also help **us** prevent fraud.
- **Your** personal details may be transferred to countries outside the EEA. They will at all times be held securely and handled with the utmost care in accordance with all principles of UK law.
- **We** may pass **your** information to selected third party advisors or suppliers outside the Allianz Group for the purpose of administering **your** claim.

## Cancellation Rights

If, after receiving **your Certificates of Insurance** and full policy Terms and Conditions, **you** are not happy you have 14 days during which **you** can cancel the policy. In this case **we** will cancel **your policy** and **you** will receive a full refund of any premiums paid. Simply call Customer Services on 0845 070 1063 or send written confirmation to:

Scottish Equestrian Insurance Services  
Great West House (GW2)  
Great West Road  
Brentford  
Middlesex  
TW8 9DX  
United Kingdom  
Email [info@seisinsurance.plus.com](mailto:info@seisinsurance.plus.com)

If **you** cancel outside the 14-day cancellation period and the premium becomes due **you** may not receive a full return of **your** premium.

**You** may cancel **your policy** at any time by calling or writing to **us** and **we** may give **you** a refund of the money **you** have paid for the **policy year** after the cancellation date. If **we** have paid a claim **you** may not receive a full return of **your** premium.

**We** may cancel **your policy** at any time by giving **you** 7 days' notice in writing to the last address **you** have given **us** and **we** will give **you** a refund of the money **you** have paid for the **policy year** after the cancellation date.

It is important to note that if **your policy** is cancelled or comes to an end for any other reason all cover will stop on the date the policy is cancelled/ends and no further claims will be paid.

## How to claim

**You** must tell **us** as soon as possible if anything happens which could lead to a claim. Please contact Customer Services on 0845 070 1063 or write to:

Scottish Equestrian Insurance Services  
Great West House (GW2)  
Great West Road  
Brentford  
Middlesex  
TW8 9DX  
United Kingdom  
Email [info@seisinsurance.plus.com](mailto:info@seisinsurance.plus.com)

### When to claim

**We** will not accept claims submitted more than 12 months after the treatment start date. This means **you** must send **us** **your** claim no later than 12 months after the date **your horse's** treatment started.

To claim please send **us** the completed claim form and the supporting documentation listed below. Most claim forms can be downloaded from our website, [www.seisinsurance.co.uk](http://www.seisinsurance.co.uk).

Please make sure **your** claim form is fully completed by **you** and if applicable, **your vet**, as any incomplete claim forms will be returned to **you** and this will delay **your** claim. **Your** insurance does not cover any charges made for the completion of claim forms.

### **Section 1A: Death of your horse (Injury or Illness) and Section 1B: Death of your horse (Injury Only - Mature Horse)**

- The post-mortem report (unless **you** have spoken to **us** and **we** have advised this is not required).
- A veterinary clinical history report.
- The disposal receipt.
- If **you** own the horse, evidence of **your** legal ownership.
- If **you** have the horse on **loan**, evidence of the horse's legal ownership and a copy of the loan agreement signed by both parties.

### **Section 2: Loss by theft or straying**

*Only original documents are acceptable.*

- If **you** own the horse, evidence of **your** legal ownership.
- If **you** have the horse on **loan**, evidence of the horse's legal ownership and a copy of the loan agreement signed by both parties.
- If **you** are claiming for advertising expenses, the receipts showing the costs involved.

### **Section 3A: Veterinary Fees (Injury and Illness) and Section 3B: Veterinary Fees (Injury Only - Mature Horse)**

- The veterinary invoices showing the costs involved.
- If **your horse** has been referred to another veterinary practice or a veterinary hospital, the referral report.

### **Section 4: Alternative Therapies and Section 5: Non-Veterinary Fees**

- The original invoices showing the costs involved.

### **Section 6: Disposal**

- The disposal receipt.

### **Section 7: Permanent Loss of Use**

- A veterinary clinical history report.
- If **you** own the horse, evidence of **your** legal ownership.
- If **you** have the horse on **loan**, evidence of the horse's legal ownership and a copy of the loan agreement signed by both parties.

### **Section 8: Saddlery and Tack**

*Only original documents are acceptable.*

- The original purchase receipt(s) or saddler's valuation(s) for any item valued over £400.
- If stolen, the crime report.
- If stolen or damaged beyond repair, two quotations to replace the **saddlery and tack** with brand new equivalent items.
- If damaged and beyond repair, written confirmation from a saddler showing each item is damaged beyond repair and stating the approximate value before damage.
- If damaged and repairable, two estimates for repair.

### **Section 9: Personal Accident and Section 10: Personal Liability**

Please contact **us** and **we** will advise what additional documents are needed.

### **Section 11: Horse-Drawn Vehicles or Horse Trailers**

*Only original documents are acceptable.*

- The original purchase receipt.
- Documentation to support the current value, such as advertisements of similar items or a letter from the supplier.
- If stolen, the crime report.
- If damaged and repairable, two estimates for repair.
- If damaged beyond repair, written confirmation from the repairer showing the item is damaged beyond repair and stating the approximate value before damage.
- If stolen or damaged beyond repair, two quotations to replace the item with an item of the same age, condition, make and model at the time the loss or damage occurred.

## Customer Service

If **you** have a question about **your** policy please call **our** Customer Services on 0845 070 1063 or write to:

Scottish Equestrian Insurance Services  
Great West House (GW2)  
Great West Road  
Brentford  
Middlesex  
TW8 9DX  
United Kingdom  
Email [info@seisinsurance.plus.com](mailto:info@seisinsurance.plus.com)

## Complaints

**Our** aim is to get things right, first time, every time. If **we** make a mistake **we** will try to put it right promptly. **We** will always confirm to **you** the receipt of **your** complaint within five working days and do **our** best to resolve the problem within four weeks. If **we** cannot **we** will let **you** know when an answer may be expected. If **we** have not sorted out the situation within eight weeks **we** will provide **you** with information about the Financial Ombudsman Service.

Please contact **us** at:

Customer Satisfaction Manager  
Allianz Insurance plc  
Great West House (GW2)  
Great West Road  
Brentford  
Middlesex  
TW8 9DX  
United Kingdom  
Phone 0845 026 1985  
Email [ahd.csm@allianz.co.uk](mailto:ahd.csm@allianz.co.uk)

Using **our** complaints procedure or referral to the Financial Ombudsman Services does not affect **your** legal rights. In all communications please quote **your** policy number.

## Financial Services Compensation Scheme

If Allianz is unable to meet its liabilities **you** may be entitled to compensation under the Financial Services Compensation Scheme (FSCS). Further information about compensation scheme arrangements is available at [www.fscs.org.uk](http://www.fscs.org.uk), by emailing [enquiries@fscs.org.uk](mailto:enquiries@fscs.org.uk) or by phoning the FSCS on 0207 892 7300.

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Allianz Insurance plc is authorised and regulated by the Financial Services Authority. Allianz Insurance plc's FSA Register No. is 121849.  
This can be checked by visiting the FSA website at [www.fsa.gov.uk/register](http://www.fsa.gov.uk/register) or by contacting the FSA on 0845 606 1234.