# PAW CARE INSURANCE POLICY

**PREAMBLE**

ICICI Lombard General Insurance Company Limited ("the Company"), having received a Proposal and the premium from the Insured named in the Schedule referred to herein below, and the said Proposal and Declaration together with any statement, report or other document leading to the issue of this Policy and referred to therein having been accepted and agreed to by the Company and the Insured as the basis of this contract do, by this Policy agree, in consideration of and subject to the due receipt of the subsequent premiums, as set out in the Schedule with all its Parts, and further, subject to the terms and conditions contained in this Policy, as set out in the Schedule with all its Parts that on proof to the satisfaction of the Company of the compensation having become payable as set out in Part I of the Schedule to the title of the said person or persons claiming payment or upon the happening of an event upon which one or more benefits become payable under this Policy, the Sum Insured/appropriate benefit will be paid by the Company.

**PART I - Policy Schedule**

| **Insured Details** | | | | |
|---|---|---|---|---|
| **Name (Pet Owner)** | | | | |
| **Address** | | | | |
| **Master Policy Details (If Applicable)** | | | | |
| **Contact No.** | | **Policy No.** | | |
| **Email Address** | | **Period of Insurance** | Start Date | |
| | | | End Date | |
| **Policy Issuing Office** | | **Policy Tenure** | | |
| **No. of Pets** | | **Policy Issued On** | | |

| Sr. No. | Type of Pet (Cat/Dog) | Name of the Pet | Breed Details | Pet Category (Small /Large /Medium/ Giant /Mixed) | Gender (M/F) | Age (Yr & Mths) | Body Colour | RFID (If available) | Identification Mark |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| **COVERAGE DETAILS** | | |
|---|---|---|
| **Mandatory Cover either section 1 or 2** | **Yes/No** | **Sum Insured (INR)** |
| **Section.1 Comprehensive Cover** | | |
| **OR** | | |
| **Section.2 Named Surgery/Illness Cover** | | |
| a) Surgery Cover | | |
| b) Hospitalisation Cover | | |
| **Optional Covers** | | |

| Cover | Yes/No | Sum Insured (INR)/No of Sessions | Cover | Yes/No | Sum Insured (INR)/No of Sessions |
|---|---|---|---|---|---|
| Section 3. Accidental and Illness Death Benefit | | | Section 10. Behavioural illness cover | | |
| Section 4. OPD Cover | | | section 11. Complications during Pregnancy & Birth related cover | | |
| Section 5.Third Party Liability Cover | | | Section 12. Specialized therapy for Disease recovery Cover | | |
| Section 6. Theft/Lost/Straying Cover | | | Section 13. Emergency Road Ambulance cover | | |
| Section 7.Trip Cancellation Cover | | | Section 14. Terminal Disease Cover | | |
| Section 8. Emergency Pet Minding Cover | | | Section 15. Long Term Care Cover | | |
| Section 9. Dental Treatment Cover | | | Section 16. Tele-Veterinary Consultancy Cover | | |

| Particulars | Details |
|---|---|
| 1) Tele Veterinary Consultancy Cover: (Yes/No) | |
| a) Max No. of Video Consultations offered per year | |
| b) Max No. of Telephonic Consultations offered per year | |
| 2) Pet Care Services–Facilitation (Yes/No) | |
| 3) Theft/lost/Straying cover with Tracking device (Yes/No) | |
| 4) Waiting Period in Days applicable for all the section | |
| 5) Sub limit for Fracture of Limbs in amount (INR) | |

| Particulars | Details |
|---|---|
| 6) Advertising Expenses under theft cover (INR) | |
| 7) Reward under theft cover in case pet is found (INR) | |
| 8) Daily allowance limit under Emergency Pet minding cover | |
| 9) No of days covered under Emergency pet minding cover | |
| 10) No of session under Specialized therapy | |
| 11) Per session limit under Specialized therapy cover (INR) | |
| 12) Per Day limit under Hospitalization cover | |

| Special Conditions | | | |
|---|---|---|---|
| **Item** | **Sub-Limit** | **Item** | **Sub-Limit** |
| Hospital Boarding Expenses | | Medication and Consumables | |
| Vet Consultancy Fees | | Surgery Expenses | |
| Diagnostic Expenses | | Pre-Post Surgery expenses | |

| Premium Details in INR | | | |
|---|---|---|---|
| Basic cover premium: | | Additional cover Premium: | |
| Net Premium: | | Taxes | |
| Total Premium: | | | |

**DETAILS OF INTERMEDIARY/SPECIFIED PERSON/PRINCIPAL OFFICER**

Intermediary Name & Specified Person Name / Principal Officer Name:

Code/Functional Identity:

Contact No. of the branch:

Email ID of the branch:

Branch/Office:

| Co-payment Details | | Deductible | | GSTIN Reg. No. | HSN/SAC code | Stamp Duty |
|---|---|---|---|---|---|---|
| Applicable Sections | Co-Payment (%) | Applicable Sections | Deductible (%) | | | |
| | | | | | 997139 GENERAL INSURANCE SERVICES | The stamp duty of INR…. paid vide deface no. …….. |

| Other details (If any) |
|---|
| |
| |
| |
| |

Signed for and on behalf of the ICICI Lombard General Insurance Company Limited, at _____ on this date……..

Yours Sincerely,

Authorized Signatory

**ICICI Lombard General Insurance Company Limited**

**Please refer the link or scan the QR code for accessing the Customer Information sheet**

**PART II – POLICY WORDING**

**Definitions:**

1. "**Accident or Accidental**" means a sudden, unforeseen, and unexpected physical event caused to the Insured Pet by external, visible, and violent means.
2. "**Bodily Injury/ Injury**" means Accidental physical bodily harm, excluding Illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Veterinarian.
3. "**Cover Period**" means the period as specified in the Certificate of Insurance issued to the respective Pet Owner during which the Insured Pet is covered as per Terms and Conditions of the Group Policy.
4. "**Claim**" means a claim under an operative part of the Policy/Group Policy read with these Terms and Conditions. All Claims resulting from one and the same event or circumstance shall jointly constitute one Claim under this Policy/Group Policy and as having been made at the time when the first Claim was made in writing.
5. "**Congenital Defects or Abnormalities**" means any condition(s) or disorder(s) present at and existing from the birth of Insured Pet, and which is abnormal with reference to form, structure, or position of Insured Pet.
6. "**Co-pay**" A Co-payment means a cost sharing requirement under Policy/Group Policy for the Insured Pet that provides that the Pet Owner will bear a specified percentage of the admissible Claims amount for the Insured Pet's Treatment. A co-payment does not reduce the Sum Insured.
7. "**Deductible Excess**" means the amount of expenses to be borne by the Pet Owner before the compensation under the Policy shall become payable and this amount shall not be reimbursed by the Company.
8. "**Dental Surgery/Treatment**" means any Surgery / Treatment of the teeth, gums, or mouth of the Insured Pet.
9. "**Diagnostic Expenses**" means any costs incurred in order to diagnose the Illnesses for the Insured Pet which is covered under this Policy/Group Policy.
10. "**Experimental Surgery/Procedure**" means any Treatment to Insured Pet, including drug experimental therapy which is not based on established Veterinary medicine practice in India, is Treatment experimental or unproven. Surgeries shall be construed accordingly.
11. "**Family**" means Pet Owner's spouse, children or parents, sisters, brothers, grandparents, and grandchildren permanently residing with Insured in Insured's home.
12. "**Grace Period**" means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a Policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.
    Note- Grace Period shall not be applicable for Group Policy
13. "**Group**" means the definition of a group provided under Regulatory Prescriptions amended/modified/sand issued, from time to time.
14. **Group Policy Holder/Group Manager** means the Organization or Legal Entity [whose name is mentioned in Master Policy Schedule] which has taken the Group Policy on behalf of all Pet owners.

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15. **Group Policy Period** means period as mentioned in the respective Group Policy Schedule during Which Certificate of Insurance will be issued to Pet Owner

16. **Group/Master Policy Schedule** means the schedule and parts thereof issued by the Insurer to Group Manager an any annexure to it read with endorsements, if any, read with respective Certificate of Insurance which are forming part of the Group Policy.
17. "**Illness**" means any change in the normal healthy state of Insured Pet as a result of sickness, physical disease, infection, defect or abnormality which is not caused by Injury.
18. "**Incident**" means an identifiable Illness or Injury arising on a specific date within Policy Period/Cover Period. Repeated, recurring or ongoing incidents shall be considered as one incident for the purposes of Claim assessment, and shall include:
    i. Clinical manifestations resulting in the same diagnosis (regardless of the number of incidents or areas of the body affected) to which Insured Pet has an ongoing predisposition or susceptibility that is related in any way to the original incident, or;
    ii. Conditions which are incurable and likely to continue for the remainder of Insured Pet's life.
19. "**Insured Pet**" shall mean the named pet specified in the Policy Schedule/ Certificate of Insurance.
20. "**Pet owner**", "You", "Your", "Policy Holder" who insures the pet and as shown in the Schedule/ Certificate of Insurance.
21. "**Lost**" shall mean that the Insured Pet is separated from the Insured and / or his Family member(s) / servants / its handler(s) as a result of some external event; unable to be found or recovered.
22. **Master Policy or Group Policy** shall mean the proposal, Group Policy Schedule, Certificate of Insurance along with terms and conditions of this Group Policy Wordings, and any endorsements attaching to and/or forming part thereof either at the commencement or during the Group Policy Period.
    Note- This definition is only applicable for Group Policy.
23. "**Medical Expenses**" means those expenses that an Pet Owner has necessarily and actually incurred for medical Treatment of the Insured Pet, which is Medically Required, on account of Illness or Accident on the advice of a Veterinary Practitioner, as long as these are no more than would have been payable if the Insured Pet had not been insured and no more than other Vets or Veterinary Clinics or Veterinary Hospitals in the same locality would have charged for the same medical Treatment to the Insured Pet.
24. "**Medically Required**" means any Treatment which is directly and materially required to provide relief from covered Illness or Injury, as certified by the treating Veterinary Practitioner.
25. "**OPD**" Treatment is one in which the pet is taken to a Veterinary Clinic/ Veterinary Hospital for diagnosis and Treatment based on the advice of a Veterinary Practitioner. The pet is not admitted as in-patient in case of OPD Treatment.
26. **Policy** means the proposal, the Policy Schedule along with terms and conditions of this Policy Wordings, and any endorsements attaching to and/or forming part thereof either at the commencement or during the Policy Period.
    Note- This definition is not applicable for Group Policy.
27. **Policy Period** means the period as specified in the Policy Schedule issued to the Insured during which the Insured Pet(s) is covered under the Policy.
    Note- This definition is not applicable to Group Policy.
28. **P**olicy Schedule/Certificate of Insurance" means the Schedule attached to and forming part of this Policy mentioning the details of the Insured Pet, the Sum Insured, the period and the limits to which benefits under the Policy are subject to (Schedule of coverage), including any Annexures and/or endorsements, made to or on it from time.

29. "**Sum Insured/ Limit of Indemnity**" means the amount stated in the Policy Schedule/ Certificate of Insurance, which is the maximum amount (regardless of the number of Claims made or the number of the Insured's who make a Claim for any one Claim and in the aggregate for all Claims during the Policy Period/Cover Period.
30. "**Straying**" shall mean that the Insured Pet has gone missing on its own from its usual place or fled from Insured's premises and is unable to be traced.
31. "**Surgery**" or "Surgical Procedure" means manual and / or operative procedure(s) required for Treatment of Insured Pet for an Illness or Injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a Veterinary Hospital by a Veterinary Practitioner.
32. "**Treatment**" means any examination, consultation, advice, tests, x-rays, drugs, or medication administered or prescribed Surgery, nursing or therapy provided by or under the direction of a Vet.
33. "**Theft" - As per Section 303 in The Bharatiya Nyaya Sanhita, 2023 , theft is defined as Whoever, intending to take dishonestly any movable property out of the possession of any person without that person's consent, moves that property in order to such taking, is said to commit theft**.
    i. any person excluding Pet Owner, Pet Owner's Family members, employees and treating Veterinarian.
    ii. any pet animal owned by a person excluding Pet Owner, Pet Owner's Family members, employees or any person contracted in respect of the Insured Pet.
34. "**Third Party**" means -
    i. any person excluding Pet Owner, Pet Owner's Family members, Pet Owner's employees and treating Veterinarian.
    ii. any pet animal owned by a person excluding Pet Owner, Pet Owner's Family members, Pet Owner's employees or any person contracted in respect of the Insured Pet.
35. "**Veterinary Clinic**" means a place where a registered Veterinary Practitioner renders services for Treatment, prophylaxis, diagnosis, or advice on request of a client.
36. "**Veterinary Hospital**" means an institution under the charge of a registered Veterinary Practitioner where Veterinary services are available at all times and wherein examination, Diagnostic, prophylactic, medical, surgical and extended accommodation services for hospitalized animals are provided. The hospital shall have facility for indoor patients 24x7 & at least minimal facilities for client accommodation.
37. "**Vet**" or "Veterinarian" or "Veterinary Practitioner" or "Veterinary Doctor" means a person holding a veterinary qualification recognized under the Indian Veterinary Council Act, 1984 and registered with a State/UT Veterinary Council.
38. "**Vet Fees**" means the standard, customary and reasonable sums incurred to treat an Incident suffered by Insured Pet and normally charged by a Vet practicing in the area in which the pet suffers the Incident, including but not limited to: Any consultation, examination, advice, test, Diagnostic procedure, Surgery and/or nursing carried out by a Vet, a Veterinary nurse or another member of the Veterinary Practice under the supervision of a Vet Surgeon; and/or Any medication or therapy legally prescribed by a Vet.
39. **"Company, We, Our, Us, Insurer"** means ICICI Lombard General Insurance Company Limited
40. **"Working Pets"** means pet which are being used or trained for commercial use, guarding, security, farming,
    hunting, racing, volunteering etc.
41. **"Volunteer Pets"** are classed as **Working Pets** and are in the course of volunteering activities.

**OPERATIVE PART: Mandatory to opt for Either Section 1 or Section 2**

**SECTION 1: COMPREHENSIVE COVER**

**Scope of Cover:**

We will indemnify You for expenses incurred for Diagnostic Expenses, any Treatment including prescribed surgery and Medical Expenses in case the Insured Pet is suffering from any Illness or a repeating or chronic condition or needs a treatment due to an Accident subject to waiting period and specific exclusion's mentioned in section 1 and general exclusion of this policy wordings.

**Special Condition**: Expenses incurred on outpatient treatment are excluded unless specifically mentioned in the policy schedule.

**Co-payment**: We will pay up to the Sum Insured subject to the applicable co-payment as chosen by You and mentioned in the Policy Schedule/Certificate of Insurance.

**Specific Exclusion Applicable to Section 1:**

1. Any hospitalization in which the Insured pet does not require a minimum of 24 Hours of in-patient Treatment. However, wherever it is established to Company's satisfaction that requisite facility for 24 Hours Hospitalization was not available to the Insured pet, claim under this section shall be admissible with prior intimation/notification to us, subject to Co- Payment up to 30% for each insured event.
2. No indemnity shall be available under this cover for any Incident claimed under Section 4 (OPD Cover). Out-patient treatments of the Insured Pet (This exclusion shall not apply if OPD cover is opted).
3. Vet Visit Fees for routine check-up, routine diagnostics tests or vaccination.
4. Treatment undergone purely for cosmetic or psychological reasons to improve appearance. However, this exclusion does not apply where such treatments are medically required as apart of treatment for cancer, Accidents and burns to restore functionality.
5. Any treatment or diagnostic procedures that is in any way connected with Insured Pet being pregnant, subsequent complications, termination of pregnancy, giving birth, or rearing puppies, unless it is a spaying for a medical condition included or if opted for Complication during pregnancy & birth related cover.
6. The treatment of or training for diagnosed behavioural problems unless specifically opted.
7. Malignant cancer of any type.

**SECTION 2: NAMED SURGERY/ ILLNESS COVER**

2 (a) and 2 (b) are mandatory section under the cover;

**2 (a) SURGERY COVER**

We shall indemnify You for Surgical expenses incurred by You for Treatment of the Insured Pet under this Policy/Group Policy. This Treatment must be carried out by a Vet at his/her Veterinary Clinic and/or Veterinary Hospital and should be necessitated by an Accident/Illness occurring to the Insured Pet during the Policy Period/ Cover Period. The maximum amount We pay under this cover shall be of Sum Insured specifically mentioned in the Policy Schedule/ Certificate of Insurance.

We will also pay towards Medical Expenses incurred in the event of a fracture of any limbs of the Insured Pet under this section which does not require Surgery. The sublimit for this cover shall be as specified in the Policy Schedule/Certificate of Insurance which shall be a part of and not in excess of the Sum Insured applicable to this section.

**Surgical Expenses to be Considered**

- **Vet Consultation Fee:** Consultation/Examination Fee of the treating veterinarian
- **Medications and Consumables:** Drugs, medicines, consumables (not re-usable), prescribed by a licensed veterinarian. This also includes Anaesthesia, Blood transfusion, Oxygen therapy, cost of internal prosthetic and other devices or equipment if implanted internally during the Surgical Procedure.
- **Surgical Procedures:** Surgical procedures (including Surgeon Fees and/ or Anaesthesia fees) carried out by a licensed veterinarian to treat or diagnose an illness/disease.
- **Boarding Expenses applicable to Section 2(a) and Section 2(b):** Boarding charges at a licensed veterinary Hospital.
- **Pre / Post Surgery Expenses:** The Medical and/or **Diagnostic Expenses** incurred during the
  i) 7 days immediately before the **Surgery**; and
  ii) first 15 days immediately after the **Surgery** are covered, provided that such expenses/costs were incurred for the same **Illness**/**Injury** for which subsequent **Surgery** was required, and the **Company** has accepted the **Claim** for **Surgery**.

We will indemnify You for all above expenses incurred up to the Sum Insured under this section with sublimit under each heads as specifically agreed by Us and mentioned on the Policy Schedule provided the Pet has to undergo any of the Surgical Procedures as specified in Annexure-I

**2 (b): HOSPITALISATION COVER**

**Scope of Cover:**
We shall indemnify You for all reasonable and customary charges made for in-patient Treatment for Illness as specified in Annexure II or Accidental Injury to the Insured Pet, carried out in a Veterinary Hospital and necessitated/ Medically Required by an Incident occurring to the Insured Pet during the Policy Period/ Cover Period subject to the per day hospitalization limit, not exceeding the sum insured mentioned in the Policy Schedule/ Certificate of Insurance.

**Specific Exclusion Applicable to only Section 2(b):**

1. Any hospitalization in which the Insured pet does not require a minimum of 24 Hours of in-patient Treatment. However, wherever it is established to Company's satisfaction that requisite facility for 24 Hours Hospitalization was not available to the Insured, claim under this section shall be admissible with prior intimation/notification to us, subject to Co- Payment of 30% for each insured event.
2. No indemnity shall be available under this cover for any Incident claimed under Section 4 (OPD Cover).

**Specific Exclusions applicable to Section 2(a) and Section 2(b):**
We shall not be liable to indemnify You for the cost incurred in relation of -

1. Any Surgeries/Hospitalization which are not necessitated due to any Accident/Illness, including but not limited to
   i. Cosmetic, aesthetic, or elective Surgery such as tail docking, declawing, removal of eyelashes, cropping of ears or any other procedure, any experimental Surgeries.
   ii. Pregnancy or giving birth, whelping, pet grooming, breeding, or skin diseases.

iii. Removal of any abnormal growth such as a wart, abscess, benign and malignant tumors. However, this exclusion shall be waived off after 2 consecutive renewals.
iv. Procedures like hysterectomy, spaying (including spaying following a false pregnancy) and castration unless costs claimed are for the Treatment of complications arising from this procedure.
v. Dental Surgery unless the cover is specifically availed under dental treatment cover.
vi. Any elective Treatment, any preventive Treatment or any Treatment that You choose to have carried out, including any complications that arise thereof.

2. Fees for Treatment of an Illness or Injury for which the Insured pet was advised prior to commencement of the Policy/Group Policy by a Vet to take preventive measures and he/she did not do so.
3. Any Claim arising from expenses incurred for Treatment of an intentional Injury or condition as a result of abuse (including persistent neglect) of Insured Pet, by the Insured or a member of the Insured's household.
4. Congenital defects/deformities, where clinical sign(s) were apparent prior to the effective date of the Policy/Group Policy or that became apparent during the first fourteen (14) days prior to the commencement date of this Policy/Group Policy.
5. Vaccination and micro-chipping, other than the cost of treating any complications that arise from this procedure.
6. Cost of artificial body parts and/or prosthesis.
7. Non-medical cost incurred for Treatment of Insured Pet
8. Expenses which can be covered under any other Section of this Policy/Group Policy.
9. Any Claim arising from expenses incurred for Treatment of Illness or Injury arising out of:
   a) Racing
   b) Coursing
   c) Commercial guarding
   d) Organized fighting; or
10. Any other occupational, professional or business uses of the Insured
11. For any Incident, a Claim shall be admissible under either Section 2(a) or Section 2(b) but not both.

**SECTION 3 : Accidental and Illness Death BENEFIT**

**Scope of Cover:**

We shall pay the Sum Insured as shown on the Policy Schedule/ Certificate of Insurance, if the Insured Pet dies because of -

- An Illness or
- Accident or
- As a result of the Vet putting Insured Pet to sleep in order to alleviate its incurable and inhumane suffering due to an Illness or Accident during the Policy Period/ Cover Period.

**Specific Exclusions**:

The Company shall not pay any amounts under this accidental and illness benefit:

1. If the Insured Pet is put to sleep due to aggression unless this can be attributed to an Illness and can be certified by a Veterinary Doctor.
2. If the Death results from or the Insured Pet is put to sleep from an Illness, it has not been vaccinated against despite the requirement to do so.

3. Claims arising due to the intentional slaughter, irrespective of any order by Government, Local Authority, or any person having jurisdiction in the matter.
4. Death resulting from medication/ Treatment not recommended by Vet.

**NOTE**:

- Accidental and Illness Death Benefit Cover will not be available for Giant Dog Breeds over the age of 4 years and all other Breeds over the age of 7 years, except if renewed with us without break.
- Accidental and Illness Death Benefit Cover will not be available for Cats of all Breeds over the age of 7 years, except if renewed with Us without break.
- In the event of death of the Insured Pet, where such death is attributable to or caused due to a Terminal Diseases, where Insured Pet is covered under both Section 3 and Section 14, and where a Claim under Terminal Diseases Cover is already admitted under the Policy, the Company will pay the Sum Insured specified against this benefit in the Schedule/Certificate of Insurance minus any sums already admitted for payment under the Terminal Diseases Cover under the Policy/Group Policy.

## SECTION 4: OPD COVER

**Scope of Coverage:**

We shall indemnify You for the costs incurred by you for the Treatment of the Insured Pet, carried out by a Vet at his/her Veterinary Clinic, up to the amount specifically agreed and mentioned on the Policy Schedule for the following Illness & services as:

| **For Dogs & Cats** | | | |
|---|---|---|---|
| 1 | Meningitis | 11 | Upper Respiratory Tract infection |
| 2 | Hepatitis/Liver Dysfunction | 12 | Colitis |
| 3 | Pneumonia | 13 | Toxoplasmosis |
| 4 | Peritonitis | 14 | UTI (Urinary Tract Infections) |
| 5 | Inflammation of Prostate Glands | 15 | Anaemia |
| 6 | Pyometra | 16 | Ear Infection |
| 7 | Vestibular Disorder | 17 | Anal Gland Infection |
| 8 | Eye Related Problems except for Glaucoma | 18 | Any Bodily Injury to the insured dog arising out of Accidents |
| 9 | Parvo virus & Gastro-enteritis | 19 | Blocked tear duct, infected tear duct |
| 10 | Ear Hematoma | 20 | Bronchitis |

**Deductible:**

A compulsory Deductible of 10% of the Claim amount, subject to a minimum of Rs. 1000/- is applicable on each and every Claim unless specifically agreed otherwise by Us and mentioned on the Policy Schedule.

**Specific Exclusions:**

a. Any Claim related to Glaucoma shall not be payable under this Section.
b. Any Claim arising out of a Surgery conducted on the Insured Pet.
c. Any expenses which can be covered under any other Section of this Policy/Group Policy

**NOTE**:

- OPD Cover will not be available for Giant Dog Breeds over the age of 4 years and all other Breeds over the age of 7 years, except if renewed with us without break.
- OPD Cover will not be available for cats over the age of 7 years of age except if renewed with us without break.

## SECTION 5: THIRD PARTY LIABILITY COVER

**Scope of Coverage:**

We shall pay up to the Sum Insured for an amount that You are legally liable under civil or public liability to pay including any legal expenses and costs, for any bodily Injury and/or sickness and/or death or property damages of a third party caused by Insured Pet. We will only accept a claim if the loss has occurred during the period of insurance and if the liability has been decided by a competent judicial authority falling under the Jurisdiction of India. Provided that the Company reserves the right to contest the said liability decided by the said competent judicial Authority of India.

**Specific Exclusion:**

We will not be liable for any claims caused by or resulting directly or indirectly from:

- Liability which is expected or intended or assumed by You.
- Liability arising out of or in connection with a business engaged in by You.
- Claims where no liability is established by a competent court or tribunal or forum constituted under applicable law.
- Any damages, costs and expenses where the Injury or damage was caused by the unlawful act or illegal activities including criminal acts, deliberate acts or omissions of the Pet Owner or members of Pet Owner's Family, or employed by the Pet Owner including staff/caretaker.
- Any Claim arising from breach of quarantine restrictions or import or export rules and regulations
- Any compensation cost and expenses if the incident happens in an area or place where pets are specifically prohibited unless the Insured Pet escapes and enters the area outside of Your control.
- A claim by any person who is part of Pet Owner's Family, lives in Pet owner's residence or any temporary of full time employee/ worker of the Pet owner including but not limited to any professional or caretaker who is paid to look after the Insured Pet or is paid to train the Insured Pet.
- Any claim by a Vets, trainers, kennel employees, breeders, shop owners, where the incident has occurred in the course of conducting their profession/occupation.
- Any claim for penalty or fines or legal expenses or cost as adjudged by competent criminal court or Government authorities.
- Any claim arising out of any contractual liability.

## SECTION 6: THEFT/LOST/STRAYING COVER

This cover can be opted through either 6(i) or 6(ii)

**6(i) Scope of Cover**

We shall pay You the lump sum amount set against this Section as shown on the Policy Schedule/ Certificate of Insurance, in respect of permanent loss as a result of Insured Pet Being Lost or Theft or stolen or strayed and no recovery having been made after 45 days' attempts to trace the Insured Pet including advertising and reward.

**6(ii) Scope of Theft/Lost/Straying cover with Tracking device**

We shall pay You the lump sum amount set against this Section as shown on the Policy Schedule/ Certificate of Insurance, in respect of permanent loss as a result of Insured Pet being Lost or stolen or strayed and no recovery having been made after 45 days' of attempt to trace the Insured Pet (including advertising and reward) despite having technical mechanism through appropriate tracking device which is availed at the time on or before inception of the policy from any vendor and was duly informed to us provided the tracking mechanism is compiled by Pet Owner .

We shall also reimburse You for advertising in a local newspaper or other approved expenditure up to a maximum of INR 1000/- as specifically agreed and mentioned on the Policy Schedule and for a reward to be offered for recovery of the Insured Pet up to the maximum of INR 5000/- as specifically agreed and mentioned on the Policy Schedule.

**Specific Exclusions:**

We will not pay any amounts under Theft/ Lost/Straying cover for:

1. Any Claim not supported by evidence of any sort of advertising done to find the Lost Insured Pet.
2. Reimbursing any money, you spent, trying to find Your insured pet, if We have not agreed to the way You were trying to do it.
3. Any reward to anyone who is a member of the Pet Owner's Family or household residing with You or by any person employed by You.

**Special Conditions:**

1. Upon happening of a loss, you will have to immediately report the loss to the Police Authorities and get a First Information Report (FIR) lodged.
2. Every effort shall be made to trace out the Insured Pet including, if necessary, advertisements in local newspapers.
3. You shall intimate Us by registering a Theft /stolen incidence within 24 hours from the event of loss. You shall furnish the Claim intimation number once You submits the final Claim document in event of no trace of the Insured Pet within 45 days.
4. If the Insured Pet is not found within 45 days from the date of disappearance in spite of various attempts, submit a Claim for Theft or Straying to Us (no later than one year after the date Insured Pet went missing).
5. If Insured Pet is found or subsequently returned, you must repay the full amount that has been paid under this cover of the Policy/Group Policy.

**NOTE**:

- Theft / Lost / Straying Cover will not be available for Giant Dog Breeds over the age of 4 years and all other Breeds over the age of 7 years, except if renewed with Us without break.

- Theft / Lost / Straying Cover will not be available for cats above age of 7years of age except if renewed with Us without break.

**SECTION 7: TRIP CANCELLATION COVER**

In the event of an admissible claim under section 1 (Comprehensive Cover) or Section 2 (a) (surgery cover) or 2(b) (Hospitalization) which directly results in the cancellation or curtailment of a trip, we will indemnify You up to the Sum Insured for the actual non-refundable monetary loss incurred on cost of travel or accommodation including any incremental cost incurred for rescheduling travel, for which You are liable and which is not recoverable from any other source.

We will pay only for expenses incurred on domestic Travel. The travel expenses incurred for alternative travel arrangement must be of the same class and/ or type as the cancelled travel arrangement. Otherwise, the lower of cancelled travel arrangements and alternative travel arrangements shall be payable.

**Specific Exclusions:**

The Company shall not be liable to pay any benefit in respect of you for:

1) The default of any:
    a) Provider of transport; or
    b) Agent acting on Your behalf
2) Regulations made by any Government or Public Authority.
3) Strikes or labour disputes which existed or of which advance warning had been given prior to the date on which a Journey was booked by you.
4) Delay due to the withdrawal from service temporarily or permanently of any Common Carrier on the orders or recommendations of any Port Authority or Aviation Agency or any similar body in any country.
5) Any business or financial contractual obligations of you, Close Business Associate or Your Immediate Family.
6) A change of plans or disinclination of you, Close Business Associate or Your Immediate Family to travel on the journey.
7) Any cost of international travel.

**SECTION 8: EMERGENCY PET MINDING COVER**

The Company will pay a daily allowance as mentioned in the Policy Schedule / Certificate of Insurance per day up to a maximum days as opted, towards the costs incurred in engaging a pet minder/caretaker for the Insured Pet or cost of boarding your Insured pet in licensed kennel during the Policy Period in the event that the pet owner or a member of the pet owner Family is required to be hospitalized for more than 4 continuous days on the medical advice of a Medical Practitioner and no other member of the Family can look after the Insured Pet or in the event Pet owner Family member's death.

**SECTION 9: DENTAL TREATMENT COVER**

This cover cannot be offered if section 1 is opted, however If you've opted section 2, then the coverage provided under Section 2 (a) or Section 2(b) will be extended to cover for reasonable and customary charges towards Veterinary Dental Treatment of your Insured Pet. Dental illnesses cover includes:

a. Teeth abscess or infected teeth
b. Gingivitis
c. Periodontal disease
d. Periodontitis.

The claim can be made up against this Optional Cover under the following:

- Vet Consultation Fees: Consultation/Examination Fee of the treating veterinarian.
- Medications and Consumables: Drugs, medicines, consumables (not re-usable), prescribed by a licensed veterinarian. This also includes Anaesthesia and surgical Consumables (not re-usable).
- Diagnostic procedures: Necessary Procedures such as x-rays and blood tests used to make a diagnosis for same illness.
- Surgical procedures: Surgical procedures (including Surgeon Fees and/ or Anaesthesia fees) carried out by a licensed veterinarian.
- Hospitalisation / boarding: Hospitalisation / boarding charges at a licensed veterinary hospital.

Maximum claim amount payable during the policy period under Optional Cover will be up to 5% of the Sum Insured provided under Section 2, up to Rs. 5000, unless specifically agreed otherwise by Us and mentioned on the Policy Schedule.

## SECTION 10: BEHAVIOURAL ILLNESS COVER

***This cover will only be available for pet Dogs who have undergone professional training.***

If you have opted for this cover, the coverage provided under section 1 or Section 2 (b) will be extended to cover for medical expenses related to Behavioural Illnesses due to Aggression, Coprophagia (Dung eating), Hyper Sexuality, Pica, Hysteria, Neurosis, and Separation Anxiety Disorders, among others.

The claim can be made up against this Optional Cover under the following:

| | |
|---|---|
| **Vet Consultation Fees** | Consultation/Examination Fee of the treating veterinarian |
| **Medication and consumables** | Drugs, medicines, pheromone products, prescribed by a licensed veterinarian |

Provided that:

a) Clinical signs/symptoms were first shown within the Policy period.
b) Only one claim under this Optional Cover will be admissible during one Policy Period.
c) Maximum claim amount payable under this cover will be limited up to 1% of Sum Insured provided under section 1 or 2(b) unless specifically agreed otherwise by Us and mentioned on the Policy Schedule.
d) Proof of professional training of pet to be provided while opting for the cover

**Specific Exclusions:**

1) Any cost incurred on training is not covered.
2) Any behavioural illness which could have been prevented by training and/or neutering is not covered.

## SECTION 11: COMPLICATIONS DURING PREGANCY & BIRTH RELATED COVER

The Company will reimburse for the expenses incurred for Pregnancy hospitalisation or Complications arising out of Pregnancy which requires hospitalisation of Insured Pet within a Policy Year.
We will cover;
i. Reasonable and customary charges towards its treatment, including an emergency or unplanned caesarean. For example, Dystocia is one such complication animals may face while giving birth.

ii. Expenses towards treatment for any complications arising immediately after giving birth. Complications after birth in pets include:

a) Eclampsia (Milk fever)
b) Postpartum Haemorrhage
c) Retention of the foetal membranes or offspring
d) Metritis
e) Mastitis

**Specific Exclusions:**

a. Planned caesarean birth(s), unless medically necessary and as confirmed by your vet
b. Routine pre-natal examination(s)
c. Pre-breeding test(s)
d. Fertility treatment(s)
e. Artificial insemination(s)
f. Any commercial breeding related activity.

**Specific Condition:**

a. Waiting period of 6 months applicable for this coverage
b. Pregnancy related expenses are covered once in a policy year.

## SECTION 12: SPECIALIZED THERAPY FOR DISEASE RECOVERY COVER

The Company will reimburse expenses post discharge from the hospital incurred towards therapies Hydrotherapy, Physiotherapy and Acupuncture taken for your Insured Pet up to the Sum Insured mentioned in your Policy Schedule.

Provided that,
1.Licensed Veterinarian has prescribed the abovementioned specialized therapies.
2 Specialized therapies are covered up to the number of sessions opted and mentioned in Policy schedule. Maximum fees per session for Specialized therapies is as mentioned in your Policy Schedule.
3.The claim will only be payable if the treatment or therapy taken is for the same illness or injury for which claim was triggered under section 1 or section 2(a) and 2(b).

## SECTION 13: EMERGENCY ROAD AMBULLANCE COVER

The company will reimburse expenses incurred towards ambulance charges for transportation of an Insured Pet from home to nearest Hospital/Clinic or between Hospitals/Clinics, per hospitalization up to the Sum Insured mentioned in the Schedule.
We will reimburse payments under this Benefit provided that:

a) The ambulance services are availed only in case of accidental cases of the insured pet where the insured pet is unable to move on its own.
b) The ambulance services of a Hospital or a registered ambulance service provider is utilized.
c) The original Ambulance bills and payment receipt is submitted to Us.

## SECTION 14: TERMINAL DISEASES COVER

### Scope of Coverage

We shall pay You the lump sum amount opted by You and specified in the Policy Schedule/ Certificate of Insurance, if the Insured Pet is diagnosed as suffering from any of the Terminal diseases listed as below, which first occurs or manifests itself during the Policy Period/ Cover Period and the Insured Pet survives a minimum period of 30 days from the date of diagnosis.

| Sr. No. | For Dogs | For Cats |
|---|---|---|
| 1 | Malignant Cancers | Malignant Cancers |
| 2 | Chronic Kidney failure | Chronic Kidney failure |
| 3 | Coagulation Disorders | Coagulation Disorders |
| 4 | Cardiac Dysfunctions | Cardiac Dysfunctions |
| 5 | Canine Distemper | Feline Distemper |
| 6 | Leptospirosis | Leukaemia |
| 7 | Chronic Peritonitis | Feline Infectious Peritonitis |

### Specific Exclusions:

We shall not pay You under this Section in case of the following:

1. If the Insured Pet dies before the completion of 30 days from the date of diagnosis of the above listed Terminal diseases.
2. Any Terminal diseases for which care, Treatment, or advice was recommended by or received from a Vet, or which first manifested itself or was contracted before the start of the Policy Period/Cover Period, or for which a Claim has or could have been made under any earlier Policy/Group Policy.
3. More than one Claim shall not be honored under this Section; the cover shall cease for the lifetime once claimed.

## SECTION 15: LONG TERM CARE COVER

### Scope of Coverage

We shall pay You the lump sum amount opted by You and specified in the Policy Schedule/ Certificate of Insurance against this Section, if the Insured Pet is diagnosed as suffering from any of the Illnesses listed below and require long term care, which first occurs or manifests itself during the Policy Period/ Cover Period.

| Sr. No. | For Dogs | For Cats |
|---|---|---|
| 1 | Epilepsy | Epilepsy |
| 2 | Pancreatitis | Pancreatitis |
| 3 | Diabetes Mellitus | Diabetes Mellitus |
| 4 | Thyroid Dysfunction | Thyroid Dysfunction |

| | | |
|---|---|---|
| 5 | Ascites | Ascites |
| 6 | Cushing's Syndrome | Jaundice |
| 7 | Glaucoma | Paralysis with complete or permanent loss of one or more limb |
| 8 | Inflammatory Bowel Disease | Cystitis |

**Specific Exclusions**:
More than one Claim shall not be honored under this Section during the lifetime of the pet.

**NOTE**:

- Long Term Care Cover will not be available for Giant Dog Breeds over the age of 4 years and all other Breeds over the age of 7 years, except if renewed with us without break.
- Long Term Care Cover will not be available for cats over the age of 7 years, except if renewed with us without break.

## SECTION 16: TELE- VETERINARY CONSULTANCY COVER

If you have opted for this cover, The Insured Pet shall be eligible for specific number of Telephonic and/or Video consultations in case the Insured Pet is suffering from any Illness or a repeating or chronic condition or needs a treatment due to an Accident during the policy period as specifically agreed by Us and mentioned on the Policy Schedule. Consultations (video or physical) availed at non-empanelled Vets/Service provider will not be covered under this section.

For details on our empanelled Vets/ Service provider, please refer the link provided in Policy Schedule/Certificate of Insurance.

## PET CARE SERVICES – FACILITATION

We, at your request, will provide assistance in availing the pet care services through a third-party service provider during the policy period.
This includes, but not limited to below services -

1. Pet boarding
2. Pet walking
3. Pet minding
4. Online pet consultation
5. Pet grooming
6. Pet Accessories

In the event when you seek our assistance for any of the aforementioned services, we will provide contact details of the nearby service providers in related field and earnestly try to ensure their first contact, in order to provide convenience to you. However, we are not responsible for the quality of services provided by the service provider. All monetary or other transactions shall be directly between you and the Service Provider.

The Company role shall end as soon as we provide contact details of the service provided to you. The final decision to avail the services will rest with you. In case such services are not available in that area, we shall not be held responsible in any manner, whatsoever.

**WAITING PERIODS:**

Claims under the Policy are covered subject to the Waiting Period as specified below:

- Claims received within 30 days from the first Policy **Commencement date**, under any section of the Policy, shall be excluded except claims arising due to an **Accident**.

*The Company at its discretion may agree to waiting period/limits other than as specified above on case-to-case basis. Wherever the Company agrees to offer limits other than specified above, the same shall be as specified in the Policy Schedule/Certificate of Insurance.

**GENERAL EXCLUSIONS:**

The Company will not pay any Claim whatsoever under any of the Sections, in any circumstances that are shown below:

1. Accidents occurring and/or disease contracted prior to commencement of risk. This exclusion is not applicable for the annual Policies renewed in continuity.
2. Any Claims for Diseases for which preventive medicines/vaccines has not been taken.
3. Any Treatment or prescription by a non-licensed Vet or Veterinary Hospital.
4. Treatment in any hospital or by any Veterinary Practitioner or any other provider of services that We have blacklisted and its communicated to You through various means.
5. Any animal classified as dangerous by State or Central Government Authority. The confiscation or destruction of **Insured Pet** by Government or Public Authorities, or under applicable Indian Laws.
6. Any excess amount as shown on the Policy Schedule/ Certificate of Insurance against each Section.
7. Any claim for cost or fees for procedure/surgery for **Unproven/Experimental treatment**.
8. Any claim for costs incurred on alternate Treatment unless it is opted under specialized therapy for disease recovery cover.
9. Any Homeopathic and Herbal medications.
10. Supplements and probiotics, any medical or tracking device, pet accessories even if prescribed/recommended by a Vet.
11. Any cost incurred on acupuncture or hydrotherapy, stem cell therapy unless it is opted under specialized therapy for disease recovery cover.
12. Costs for cosmetic treatment, elective treatment, routine treatment or preventative treatment recommended by a Vet to prevent an Injury or illness. Treatments including but not limited to vaccination, micro-chipping, spaying, castration, Cryptorchidism (retained testes), grooming, nail clipping, dental scaling, whelping, kittening, bathing, dematting, killing and controlling fleas and worms, spaying to prevent the re-occurrence of false pregnancy and any claims as a result of these procedures are excluded.
13. Treatment for teeth or gums if they're damaged due to tooth decay, dental or gum disease.

14. In case there is a transfer of ownership of the **Insured Pet**.
15. Any cost incurred which is covered/insured under any other insurance **Policy**.
16. Any Claim for Treatment of disease or Accidental Injury to working pet pets and Volunteer Pets
17. Any loss or damage caused willfully or knowingly by the Insured, or any loss or damage in which the Insured or any person, acting on his behalf, is involved or implicated.
18. Any consequential loss, how so ever arising.
19. Any Claims arising outside the territorial limits of India.
20. The confiscation or destruction of Insured Pet by Government or Public Authorities, or under applicable laws
21. The Pet Owner breaking any laws, or regulations, including those relating to animal health or importation.
22. Any medication or Treatment not recommended by a Vet.
23. Where fraud has been committed against the Company or where false information has been provided to the Company.
24. If the Insured Pet is sold or where any financial interest whatsoever is parted with by the Insured, whether temporarily or permanently.
25. Any other coverage that is not mentioned in the respective Sections, will not be covered under this **Policy**.
26. Any Claim arising from expenses incurred for Treatment of Illness or Injury arising out of:
    a) Racing
    b) Coursing
    c) Commercial guarding
    d) Organized fighting; or
    e) Any other occupational, professional or business uses of the Insured Pet;
27. Any endemic disease as declared by the Indian local authorities or State or Central Government.
28. Any Illness that Insured Pet contracted while outside India that it would not normally have contracted in India.
29. Legal expenses, fines and penalties connected with, or resulting from, a Criminal Case or an Act of Parliament made in India.
30. Any Claim for Treatment of a Third Party as a result of the disease transmitted from animals to humans.
31. Malicious or willful Injury or neglect, or gross negligence to Insured Pet caused by the Pet Owner, his/her agent, employees or members of Insured's Family and unskillful Treatment.
32. Any Claim in respect of a pet, categorized as dangerous pets by State or Central government authority.
33. Any charges or fees billed by the treating Vet to complete a Claim form or to provide information to support Insured's Claim.
34. In case the regular upkeep of the pet is not maintained in the form of vaccinations, regular check-ups, grooming and routine treatments as necessary, any claims arising due to lack of such care shall be denied.
35. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition of or damage by or under the order of any government or public local authority, riot, strike.
36. Any act of Terrorism which means an act, including but not limited to the use of force or violence and/ or the threat thereof, by any person or group of persons, whether acting alone or on behalf of or in connection with any organization or government, committed for political, religious, ideological, or ethnic

purposes or other reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

37. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or nuclear weapons material or from the combustion of nuclear fuel, or the radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
38. Any cost directly or indirectly arising or resulting from, or contributed to or by chemical, biological, biochemical, or electromagnetic weapon, device, agent or material, whether controlled or uncontrolled, Accidental or otherwise.
39. Any cost directly or indirectly arising or resulting from, or contributed to or by nuclear reaction, radiation, radioactive contamination, or the discharge of nuclear device, whether controlled or uncontrolled, Accidental, or otherwise.
40. Any claim for an insured pet not identified in the **Policy Schedule**.
41. The **Pet Owner** breaking any laws, or regulations, including those relating to animal health or importation.
42. If the **Insured Pet** is sold or where any financial interest whatsoever is parted with by the **Pet Owner** whether temporarily or permanently Any endemic/pandemic disease as declared by the Indian local authorities or state or central government.

**SPECIFIC CONDITIONS**:

**1.** The Insured Pet must be a minimum of 90 days old and no older than the age set out in the Policy Schedule/ Certificate of Insurance on the start date of the Policy.

**2.** The Insured Pet must live with the Insured at the address shown in the Policy Schedule/ Certificate of Insurance. The cover will cease immediately if the Insured Pet is sold or where any financial interest whatsoever is parted wit by the Insured, whether temporarily or permanently or if the Insured Pet is no longer ordinarily residing at the in- Pet Owner's premises named in the Policy Schedule/Certificate of Insurance.

**3.** The Pet Owner must take Insured Pet for regular annual check-ups and keep the pet vaccinated for rabies, distemper, hepatitis, adeno virus, leptospirosis, parainfluenza, corona and parvovirus during the entirety of the Policy Period/Cover Period. All vaccinations must be administered under Vet supervision (except Homeopathic vaccinations).

**4.** The Pet Owner agrees that his/her current and/or previous Vet may release all information or records regarding the Insured Pet to the Company or Company's agent and that the Company may release information about Insured' Policy/Group Policy to any Vet who has either treated the Insured Pet or is about to treat the insured Pet. If the Vet charges the Insured for this information, the Pet Owner will be responsible for the costs.

**5.** No cover will not be available midterm and will have to be opted for at the inception/renewal of the Policy/Group Policy.

**6.** The Pet Owner shall provide the Insured Pet sufficient and proper food, water, shelter and Treatment and shall keep secure all fences. The Pet Owner shall at all times and to the best of his/her knowledge and ability use and exercise due and proper precaution and safeguard loss or danger of loss under this Policy/Group Policy. The intent and meaning of this condition being that each Insured Pet shall have the same care and attention as when not insured.

7. **A.** In case of a fresh proposal of cover for a pet over the age of 4 years, the Company at its discretion may:
   - call for the most recent medical test reports of the pet for the Illnesses listed in Annexure-II conducted in the last 7 days for the relevant medical tests;

   OR
   - Impose an initial 03 months waiting period from the date of inception of the risk for any Claim pertaining to sickness/Illness.

**NOTE: In case of receipt of positive medical test reports for the listed Illnesses (refer Annexure II), no such pre- existing disease will be covered under this Policy/Group Policy.

**B.** In case of a fresh proposal of cover for a pet under the age of 4 years, no such reports would be required for an insurance cover.

**8. Notification of Claims and Procedure:**

**8.A. Cashless Claim Process:**

In the event of any accidental injury or illness or condition/event that may result in a claim under this policy, it is a condition precedent to Our liability under the Policy that below procedure should be followed depending on the type of claim:

Cashless Facility can be availed from our network veterinary hospitals only. This may be facilitated by Us or our Assistance service provider and we would make a direct payment to the Network Veterinary Hospital to the extent of Our Liability provided that:

1. We are given a notice at least 72 hours before any planned medical treatment/hospitalization or within 24 Hours of admission in a Registered veterinary hospital in case of an emergency.
2. For Cashless Facility the Insured shall follow the below Procedure:

a. Share the copy of E-Cards along with your ID Proof with the Veterinary Hospital Authority & Obtain the Pre-Authorization Form from the Hospital.
b. Submit Duly filled & Signed Pre-Authorization Form to the Veterinary Hospital.
c. Ensure that the Veterinary Hospital shares the Duly filled & Signed Pre-Authorization Form with Us / Assistance service provider for further Processing.
d. We / Assistance service provider will inform the decision and may issue authorization letter depending on the Policy Terms and Conditions to the Hospital directly.
e. Once the request for Pre-Authorization has been granted, the treatment must take place within 15 days of the Pre-Authorization Approval Date or the Policy Expiry Date whichever is earlier and shall be valid only if all the details of the Authorized details, Hospital and Location including Dates match with the details of the Actual Treatment Received.
f. We reserve the right to modify, add or restrict any Network Provider for Cashless Facility in Our sole discretion. Before availing Cashless Facility, please check the applicable updated list of Network Providers/hospitals in the company's website.
g. For any queries, designated Assistance service provider may be contacted on the contact details mentioned on the E-Cards issued to You.

**8.B. Reimbursement Claim Process:**

Reimbursement Facility can be availed from any Veterinary hospital/clinic within India of Insured's Choice, wherein Insured will have to make payment directly to the hospital/clinic and submit the documents to Us / Assistance service provider for processing the reimbursement of the claim amount provided that:

1. We or Our Assistance service provider should be intimated within 24 hours of admission in a veterinary hospital or within 24 hours of onset of an injury/illness/event that may lead to a claim.
2. For Reimbursement Claim the Insured shall follow the below Procedure:

a. Insured should submit all original documents pertaining to the treatment / hospitalization / Event as mentioned is the List of Claim Documents. However, for claim under section 6 – Theft or Straying, documents may be submitted after 30 days, but within 45 days.

**Address for Sending the Claim Documents:**
ICICI Lombard Health Care, 1st, 4th (Half), 5th and 6th floors, Varun Towers- II, Opp. Hyderabad Public school, Begumpet, Hyderabad, District Hyderabad, Telangana Pin code -500016

b. On receipt of intimation from the Insured regarding a claim under the Policy, we are entitled to investigate and obtain information on the alleged injury or illness or event requiring medical treatment / hospitalization, if required.

**Turnaround Time for Claim processing:** The Surveyor shall be appointed as per the regulatory prescriptions. The Surveyor / CSM shall submit the survey report/Assessment sheet (if applicable) within15 days of intimation. All Claims shall be settled within 07 days from the date of receipt of the survey report/Assessment sheet (if applicable) or claim intimation along with claim form and relevant claim related documents.

**Turnaround Time for Cashless Processing:**

- Decision on pre authorisation request will be within 24 hours from receipt of cashless request.
- Cashless pre authorization request is processed within 24 hours of receipt of all necessary documents, and Receipt of Discharge request is processed within 24 hours, upon satisfactory documentation

**List of Claim Documents required-**

i. Duly filled and signed Claim Form
ii. Self-declaration on vaccinations conducted on time & declaration for insurable interest or vaccination reports from the veterinarian.
iii. Date wise Vet Consultation Papers, prescriptions and Bills for each item claimed.
iv. Hospital final bill with date wise and item wise break up of each item claimed.
v. Complete medical history and Diagnostic Reports
vi. For claims related to death, photographs of the pet from all sides. For claims related to surgery and fracture, photographs of pet along with affected area (post-surgery). For claims related to OPD treatment, photographs of the treated pet. All the photographs should be dated, time-stamped and geo-tagged.
vii. Pre-numbered paid receipt for each financial transaction involving current claim.
viii. Death Certificate or post-mortem report from a registered veterinarian along with photographs (coloured) of the deceased pet (in case of claim underAccidental and Illness Death Benefit Cover). Death Certificate/Reports should include - Microchip number (if any), breed, colour, age, owner's name & address, date & time of death, post-mortem date, Approximate value of the animal in INR, and dates of treatment. Accidental and Illness Death Benefit
ix. Copy of First Information Report (FIR) lodged with the nearest Police station (in case of claim under Theft or Straying Cover).
x. Copy of advertisement and invoice for cost incurred in advertisement (in case of claim Optional Cover-Lost Animal Advertising Cost).

xi. Final Court Order (in case of claim under Third Party Liability Cover)

xii. Any other document as required by the Company to process the claim.

- We may refuse to reimburse you for any expenses for which you cannot provide headed invoices, receipts or bills or any handwritten bills not on a letterhead and/or without the signature/seal from the person raising the bill. You need to make sure that the bills or invoice submitted has date wise and item wise break-up of costs.

9. **Alteration of Risk:** The Policy/Group Policy, the Schedule/Certificate of Insurance, the proposal form, endorsements, Annexures shall constitute the complete contract of insurance. No change or alteration of the risk in this Policy/Group Policy shall be valid or effective and this Policy/Group Policy shall cease in case of any such alteration.

**10. Cancellation**

The Pet Owner can cancel the policy at any time during the term, by informing the company.

The company can cancel the policy only on the grounds of established fraud, by giving minimum notice of 7days to the policyholder.

The company shall –

i) Refund proportion premium for unexpired policy period, if the term of the policy is up to one year and there is no claim(s) made during the policy period.

ii) Refund premium for the unexpired policy period, in respect of policy with the term more than one year and the risk coverage for such policy years has not commenced.

## PART III - Standard Terms and Conditions

1. **Incontestability and Duty of Disclosure**
   The policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or on non-disclosure in any material particular in the proposal form, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means *or* devices being used by the Pet Owner or any one acting on his behalf to obtain any benefit under this policy.
2. **Reasonable care**
   The Insured Pet must be in sound and perfect health and free from any Injury at the time of the proposal.
3. **Observance of terms and conditions**
   The due observance and fulfilment of the terms, conditions and endorsement of this policy in so far as they relate to anything to be done or complied with by the Insured, shall be a condition precedent to any liability of the Company to make any payment under this policy.
4. **Material change**
   The Pet Owner shall immediately notify the Company by fax and in writing of any material change in the risk and cause at his own expense such additional precautions to be taken as circumstances may require to ensure safe operation *of* the Insured items or trade or business practices thereby containing

the circumstances that may give rise to the claim and the Company may, adjust the scope of cover and/ or premium if necessary, accordingly.

5. **Records to be maintained**
   The Pet Owner shall keep an accurate record containing all relevant particulars and shall allow the Company to inspect such record. The Insured shall within one month after the expiry of the insurance Policy furnish such information as the Company may require.
6. **No constructive Notice**
   Any of the circumstances in relation to these conditions coming to the knowledge of any official of the Company shall not be the notice to or be held to bind or prejudicially affect the Company not Withstanding subsequent acceptance of any premium.
7. **Notice of charge etc**.
   The Company shall not be bound to notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this policy but the receipt of the Pet Owner or his legal personal representative shall in all cases be an effectual discharge to the Company.
8. **Special Provisions**
   Any special provisions subject to which this policy has entered into and endorsed in the policy or in any separate Instrument shall be deemed to be part of this policy and shall have effect accordingly.
9. **Overriding effect of Part II of the Schedule**
   The terms and conditions contained herein and in Part II of the Schedule shall be deemed to form part of the policy and shall be read as if they are specifically Incorporated herein; however in case of any Inconsistency of any term and condition with the scope of cover contained in Part II of the Schedule, then the term(s) and condition(s) contained herein shall be read *mutatis mutandis* with the scope of cover/terms and conditions contained in Part II of the Schedule and shall be deemed to be modified accordingly or superseded In case of inconsistency being irreconcilable.
10. **Electronic Transactions**
    The Pet Owner agrees to adhere to and comply with all such terms and conditions as the Company may prescribe from time to time, and hereby agrees and confirms that all transactions effected by or through facilities for conducting remote transactions including the Internet, World Wide Web, electronic data Interchange, call centres, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities as may be prescribed from time to time.

11. **Right to inspect**
    If required by the Company, an agent/representative of the Company including a loss assessor or a Surveyor appointed In that behalf shall in case of any loss or any circumstances that have given rise to the claim to the Insured be permitted at all reasonable times to examine into the circumstances of such loss. The Pet Owner shall on being required so to do by the Company produce all books of accounts, receipts, documents relating to or containing entries relating to the loss or such circumstance in his possession and furnish copies of or extracts from such of them as may be required by the Company so far as they relate to such claims or will in any way assist the Company to ascertain in the correctness thereof or the liability of the Company under the Policy.
12. **Subrogation**

In the event of payment under this policy, the Company shall be subrogated to all the Pet Owner's rights or recovery thereof against any person or organization, and the Insured shall execute and deliver instruments and papers necessary to secure such rights. The Pet Owner and any claimant under this policy shall at the expense of the Company do and concur in doing and permit to be done, all such acts and things as may be necessary or required by the Company, before or after Pet Owner's indemnification, in enforcing or endorsing any rights or remedies, or of obtaining relief or indemnity, to which the Company shall be or would become entitled or subrogated.

**13. Contribution**

If at the time of the happening of any loss or damage covered by this policy, there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Pet Owner or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.

**14. Fraudulent claims**

If the Pet Owner or any Family member(s) or any one acting on his/Family member(s) behalf shall make misrepresentation, mis-description or non-disclosure of any material fact for obtaining the risk cover under the Policy/Group Policy, or make or advance any Claim for Insured Pet's Medical Expenses, which is in any respect fraudulent, or if any false declaration be made or used in support thereof or if any fraudulent means or devices are used or forged and or fabricated Claim supporting documents are received by the Company from Insured/representative of Insured, to obtain any Claim/benefits/indemnities for the Insured Pet under the Policy/Group Policy or for moral hazard or if the Loss or damage be occasioned by the wilful act, or with the connivance of/conspiracy with the Insured/ Family member (s) of Insured or for non-cooperation by the Insured, then the Policy/ Certificate of Insurance and all benefits under the Policy/Certificate of Insurance shall be null and void and all Claims or premium paid thereunder shall be forfeited. Provided however in case of non-cooperation by the Insured, the premium paid will not be forfeited.

**15. Cause of Action/ Currency for payments**

No Claims shall be payable under this policy unless the cause of action arises in India, unless otherwise specifically provided in Part II of the Schedule to this policy. All claims shall be payable in India in Indian Rupees only.

**16. Renewal notice**

- On renewal, the benefits provided under the Policy/Group Policy and/or terms and conditions of the Policy/Group Policy including premium rate may subject to change. Under normal circumstances, renewal of Policy will not be refused except on the grounds of Insured's moral hazard, misrepresentation, mis-description or non-disclosure of any material fact, established fraud, or Insured's non-cooperation. (Subject to Policy is renewed annually with ICICI Lombard General Insurance Company Limited within the Grace period of 30 days from date of Expiry).
- In case of Our Company's own renewal, a Grace Period of 30 days is permissible, and the Policy will be considered as continuous for the purpose of all waiting periods. However, any Claim during the break period will not be admissible under the Policy.

- For renewals received after completion of 30 days **Grace Period**, a fresh application of insurance should be submitted to the **Company**, it would be processed as a new business proposal with fresh waiting periods.

**17. Notices**

Any notice, direction or instruction given under this policy shall be in Writing and delivered by hand, post or facsimile to in case of the Pet Owner, at the address specified in Part 1 of the Schedule. In case of the Company: ICICI Lombard General Insurance Company Limited,
ICICI Lombard House, 414, Veer Savarkar Marg,
Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400025
**E-mail**: customersupport@icicilombard.com
**Toll Free No**: 1800 2666
Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail.

**18. Customer Service**

If at any time the Pet Owner requires any clarification or assistance, the Pet Owner may contact the offices of the Company at the address specified, during normal business hours.

**19. Grievances**

In case the Pet Owner is aggrieved in any way, the Pet Owner may contact the Company at the specified address, during normal business hours and person may contact the Company through
Website: www.icicilombard.com Toll free: 1800 2666
**Email**: customersupport@icicilombard.com
ICICI Lombard General Insurance Co. Ltd. Ground floor- Interface 11, Sixth floor- Interface 16,
Office no 601 & 602, New linking Road, Malad (West), Mumbai – 400064
There is an interactive voice response (IVR) facility for senior citizens' grievance redressal for easy and faster resolution

Pet Owner may also approach the grievance cell at any of the company's branches with the details of grievance. For branch details, please visit https://www.icicilombard.com/docs/default-source/policy-wordings-product-brochure/final-gro-mapping.pdf.

lf Pet Owner is not satisfied with the redressal of grievance, insured person may contact the grievance redressal officer at the details provided in the below link:
https://www.icicilombard.com/grievanceredressal.com
lf Pet Owner is not satisfied with the redressal of grievance, the insured person may also approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal - https://bimabharosa.irdai.gov.in/ or IRDAI Grievance Call Centre(IGCC) at their toll free no. 1800 4254 732 / 155255

Pet Owner may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDAI website: www.irdai.gov.in, or on the Company's website at www.icicilombard.com or on https://www.cioins.co.in/Ombudsman"

The details of Insurance Ombudsman are available below:-

| Sr. No. | Name of office of insurance Ombudsman | Territorial Area of jurisdiction |
|---|---|---|
| 1 | AHMEDABAD<br>Shri Collu Vikas Rao Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06<br>Email: bimalokpal.ahmedabad@cioins.co.in | Gujarat, Dadra & Nagar Haveli, Daman and Diu. |
| 2 | BENGALURU<br>Mr. Vipin Anand,<br>Office of the Insurance Ombudsman,<br>Jeevan Soudha Building,PID No. 57-27-N-19<br>Ground Floor, 19/19, 24th Main Road,<br>JP Nagar, Ist Phase,<br>Bengaluru – 560 078.<br>Tel.: 080 - 26652048 / 26652049<br>Email: bimalokpal.bengaluru@cioins.co.in | Karnataka |
| 3 | BHOPAL<br>Shri R. M. Singh<br>Office of the Insurance Ombudsman,<br>Janak Vihar Complex, 2nd Floor,<br>6, Malviya Nagar, Opp. Airtel Office,<br>Near New Market,<br>Bhopal – 462 003.<br>Tel.: 0755 - 2769201 / 2769202<br>Fax: 0755 - 2769203<br>Email: bimalokpal.bhopal@cioins.co.in | Madhya Pradesh,<br>Chhattisgarh. |
| 4 | BHUBANESHWAR<br>Shri Manoj Kumar ParidaOffice of the Insurance Ombudsman,<br>62, Forest park,<br>Bhubneshwar – 751 009.<br>Tel.: 0674 - 2596461 /2596455<br>Fax: 0674 - 2596429<br>Email: bimalokpal.bhubaneswar@cioins.co.in | Odisha. |
| 5 | CHANDIGARH<br>Mr. Atul Jerath,<br>Office of the Insurance Ombudsman,<br>S.C.O. No. 101, 102 & 103, 2nd Floor,<br>Batra Building, Sector 17 – D,<br>Chandigarh – 160 017.<br>Tel.: 0172 - 2706196 / 2706468 | Punjab,<br>Haryana (excluding Gurugram, Faridabad, Sonepat and Bahadurgarh),<br>Himachal Pradesh,<br>Union Territory of Jammu & Kashmir, Ladakh & Chandigarh |

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|---|---|---|
| | Fax: 0172 - 2708274<br>Email: bimalokpal.chandigarh@cioins.co.in | |
| 6 | CHENNAI<br>Shri Somnath GhoshOffice of the Insurance Ombudsman,<br>Fatima Akhtar Court, 4th Floor, 453,<br>Anna Salai, Teynampet,<br>CHENNAI – 600 018.<br>Tel.: 044 - 24333668 / 24335284<br>Fax: 044 - 24333664<br>Email: bimalokpal.chennai@cioins.co.in | Tamil Nadu,<br>Pondicherry Town and<br>Karaikal (which are part of<br>Pondicherry). |
| 7 | DELHI<br>Ms Sunita SharmaOffice of the Insurance Ombudsman,<br>2/2 A, Universal Insurance Building,<br>Asaf Ali Road,<br>New Delhi – 110 002.<br>Tel.: 011 - 23232481/23213504<br>Email: bimalokpal.delhi@cioins.co.in | Delhi & following District of Haryana – Gurugram, Faridabad, Sonepat and Bahadurgarh |
| 8 | ERNAKULAM<br>Shri G Radhakrishnan<br>Office of the Insurance Ombudsman,<br>2nd Floor, Pulinat Bldg.,<br>Opp. Cochin Shipyard, M. G. Road,<br>Ernakulam - 682 015.<br>Tel.: 0484 - 2358759 / 2359338<br>Fax: 0484 - 2359336<br>Email: bimalokpal.ernakulam@cioins.co.in | Kerala,<br>Lakshadweep,<br>Mahe-a part of Puducherry. |
| 9 | GUWAHATI<br>Shri Somnath Ghosh,<br>Office of the Insurance Ombudsman,<br>Jeevan Nivesh, 5th Floor,<br>Nr. Panbazar over bridge, S.S. Road,<br>Guwahati – 781001(ASSAM).<br>Tel.: 0361 - 2632204 / 2602205<br>Email: bimalokpal.guwahati@cioins.co.in | Assam,<br>Meghalaya,<br>Manipur,<br>Mizoram,<br>Arunachal Pradesh,<br>Nagaland and Tripura. |
| 10 | HYDERABAD<br>Shri N Sankaran<br>Office of the Insurance Ombudsman,<br>6-2-46, 1st floor, "Moin Court",<br>Lane Opp. Saleem Function Palace,<br>A. C. Guards, Lakdi-Ka-Pool,<br>Hyderabad - 500 004. | Andhra Pradesh,<br>Telangana,<br>Yanam and<br>Part of Territory of Puducherry. |

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| | Tel.: 040 - 67504123 / 23312122<br>Fax: 040 – 23376599<br>Email: bimalokpal.hyderabad@cioins.co.in | |
| 11 | JAIPUR<br>Shri Rajiv Dutt Sharma,<br>Office of the Insurance Ombudsman,<br>Jeevan Nidhi – II Bldg., Gr. Floor,<br>Bhawani Singh Marg,<br>Jaipur - 302 005.<br>Tel.: 0141 - 2740363<br>Email: Bimalokpal.jaipur@cioins.co.in | Rajasthan. |
| 12 | KOLKATA<br>Shri P K Rath,<br>Office of the Insurance Ombudsman,<br>Hindustan Bldg. Annexe, 4th Floor,<br>4, C.R. Avenue,<br>KOLKATA - 700 072.<br>Tel.: 033 - 22124339 / 22124340<br>Fax : 033 - 22124341<br>Email: bimalokpal.kolkata@cioins.co.in | West Bengal,<br>Sikkim, Andaman & Nicobar Islands. |
| 13 | LUCKNOW<br>Ms Kiran Sahdev<br>Office of the Insurance Ombudsman,<br>6th Floor, Jeevan Bhawan, Phase-II,<br>Nawal Kishore Road, Hazratganj,<br>valueLucknow - 226 001.<br>Tel.: 0522 - 2231330 / 2231331<br>Fax: 0522 - 2231310<br>Email: bimalokpal.lucknow@cioins.co.in | Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur,Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar. |
| 14 | MUMBAI<br>Mr Vipin AnandOffice of the Insurance Ombudsman,<br>3rd Floor, Jeevan Seva Annexe,<br>S. V. Road, Santacruz (W),<br>Mumbai - 400 054.<br>Tel.: 022 - 26106552 / 26106960<br>Fax: 022 - 26106052<br>Email: bimalokpal.mumbai@cioins.co.in | Goa,<br>Mumbai Metropolitan Region<br>Excluding ( Navi Mumbai & Thane). |

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|---|---|---|
| 15 | NOIDA<br>Shri Manoj Kumar ParidaOffice of the Insurance Ombudsman,<br>Bhagwan Sahai Palace<br>4th Floor, Main Road,<br>Naya Bans, Sector 15,<br>Distt: Gautam Buddh Nagar,<br>U.P-201301.<br>Tel.: 2514252 / 2514253<br>Email: bimalokpal.noida@cioins.co.in | State of Uttaranchal and the following Districts of Uttar Pradesh:<br>Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur |
| 16 | PATNA<br>Ms Susmita MukherjeeOffice of the Insurance Ombudsman,<br>2nd Floor, Lalit Bhawan,<br>Bailey Road,<br>Patna 800 001.<br>Tel.: 0612-2547068<br>Email: bimalokpal.patna@cioins.co.in | Bihar,<br>Jharkhand. |
| 17 | PUNE<br>Shri Sunil JainOffice of the Insurance Ombudsman,<br>Jeevan Darshan Bldg., 3rd Floor,<br>C.T.S. No.s. 195 to 198,<br>N.C. Kelkar Road, Narayan Peth,<br>Pune – 411 030.<br>Tel.: 020-41312555<br>Email: bimalokpal.pune@cioins.co.in | Maharashtra,<br>Area of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region). |
| 18 | THANE<br>Shri Umesh Sinha<br>Insurance Ombudsman<br>Office of the Insurance Ombudsman,<br>2nd Floor,Jeevan Chintamani Building,<br>Vasantrao Naik Mahamarg,<br>Thane (West)<br>Thane - 400604<br>Email:<br>bimalokpal.thane@cioins.co.in | Jurisdiction: Area of Navi Mumbai, Thane District, Raigad District, Palghar District and wards of Mumbai, M/East, M/West, N, S and T. |

The updated grievances redressal procedure shall be provided on the website of the Company and is subject to change in compliance with guidelines/regulations issued by Insurance Regulatory and Development Authority.

STATUTORY NOTICE: INSURANCE IS THE SUBJECT MATTER OF THE SOLICITATION

"List of Ombudsman offices established by the Central Government for redressal of grievance are also available at
https://www.cioins.co.in/Ombudsman
Note: Address and contact number of Governing Body of Insurance Council:
Council for Insurance Ombudsmen,
3rd Floor, Jeevan Seva Annexe,
S. V. Road, Santacruz (W),
Mumbai - 400 054.
E-mail: inscoun@cioins.co.in
Tel: 022 -69038800/69038812
Website: https://www.cioins.co.in

**Annexure I**

| Sr. No. | Surgery Name | Sr. No. | Surgery Name |
|---|---|---|---|
| 1 | Gastric torsion /Gastric Dilation (Bloat) | 11 | Surgical intervention on Eye under general Anaesthesia (Only for penetrating injuries to eyeball) |
| 2 | Intussusception | 12 | Surgical Intervention for any Cardiovascular Illness/ |
| 3 | Splenic Torsion | 13 | Major Injury such as fracture, deep muscular/tendon injury/wounds except maggot wound |
| 4 | Megacolon | 14 | Surgery - Tier 1 - (Spine, Cardiac & Neurosurgery) |
| 5 | Pyloric stenosis | 15 | Surgery - Tier 2 (General Surgery - GIT, Urinary & Reproductive, Ophthalmology, Respiratory, Laparoscopy, Surgical Oncology and Abdominal surgeries) |
| 6 | Benign gastric / intestinal tumours | 16 | Ortho & Dental due to Accident & Injury |
| 7 | 4th/5th rib removal / Pericardial drainage | 17 | Arthroscopic Procedures necessitated by Injuries |
| 8 | Diaphragmatic Hernia | 18 | Surgeries resulting from Arthritic Changes |
| 9 | Any kind of surgical intervention on kidney/ urinary bladder/ urethra/ ureter under general Anaesthesia | 19 | Surgeries resulting from benign Tumours / Cancer |
| 10 | Aural haematoma & Ear Related surgery | | |

**Annexure II**

| Sr. No. | Name of Illness | Sr. No. | Name of Illness |
|---|---|---|---|
| 1 | All Eye Related Problems | 17 | Leukaemia |
| 2 | All types of Cancer and Tumours | 18 | Liver Dysfunction |

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|---|---|---|---|
| 3 | Anaemia | 19 | Meningitis |
| 4 | Ascites | 20 | Osteo Arthritis |
| 5 | Canine distemper/ Feline distemper | 21 | Otitis |
| 6 | Canine leptospirosis | 22 | Pancreatic Dysfunction |
| 7 | Cardiac Dysfunctions Disorders | 23 | Paralysis with complete or permanent loss of one or more limb |
| 8 | Colitis | 24 | Parvo Virus Infection |
| 9 | Cushing's Syndrome | 25 | Peritonitis |
| 10 | Cystitis | 26 | Pneumonia |
| 11 | Diabetes | 27 | Pyometra |
| 12 | Epilepsy | 28 | Thyroid Dysfunction |
| 13 | Haematoma in Ear | 29 | Upper Respiratory Tract Infection |
| 14 | Inflammation of Prostate Glands | 30 | UTI (Urinary Tract Infections) |
| 15 | Jaundice | 31 | Venereal Granuloma |
| 16 | Kidney Dysfunction | 32 | Vestibular Disorder |