KBIS PET INSURANCE

Claim Form for Death

For official use only

PLEASE MAKE SURE THIS CLAIM FORM IS COMPLETED CLEARLY AND IN FULL TO ENSURE THE CORRECT ASSESSMENT OF YOUR CLAIM. PLEASE COMPLETE A SEPARATE FORM FOR EACH PET

N.B. Issue of this form does not constitute admission of liability on the part of the Insurers

PLEASE COMPLETE USING A BLACK PEN AND BLOCK CAPITALS.

We're happy to help!
If you have any questions call us on
0845 026 1986

1. Policyholder to complete — POLICY NUMBER

2. Policyholder to complete — ABOUT YOU

Policyholder's name

Daytime telephone no

Email address

Policyholder's address

Postcode

Please tick here if this is different to the address on your Certificate of Insurance ☐

3. Policyholder to complete — ABOUT YOUR PET

Pet's name

Pedigree name

Is your pet a Dog ☐ Cat ☐ Breed

Pet's date of birth / / Male ☐ Female ☐

Which policy plan do you have?

Is your pet insured with any other company? Yes ☐ No ☐

If Yes, please state which company

Where did you purchase your pet?

Date of purchase / /

Seller's name Mr/Mrs/Ms Initial

Address

Postcode

Amount claimed £ -

Original purchase price £ -

4. Policyholder to complete — DEATH FROM ILLNESS

Please tell us the date you noticed any signs your pet was unwell before booking your appointment with your veterinary practice / /

Date of death / /

Cause of death

5. Policyholder to complete — DEATH FROM INJURY CAUSED BY AN ACCIDENT

Date of injury / /

Date of death / /

Cause of death

Full circumstances of the accident, please continue on a separate sheet if necessary

6. Policyholder to complete — DOCUMENTATION

Documents required in support of a claim.
If you are unable to send all documents please offer an explanation on a separate sheet of paper (please ensure all supporting documentation is submitted to avoid the claim being delayed). Photocopies are acceptable for A & B. However, if required we will ask for original documents to be sent in.

Please tick relevant box to indicate document attached

A. Proof of purchase (such as a receipt) ☐

B. Pedigree certificate and Kennel Club registration ☐

C. Certificate signed by the vet stating the date and cause of death (not required if supported by a claim for veterinary fees) ☐

D. Only for death from injury: If you are unable to provide a death certificate from your vet please provide a statement supporting your claim from someone (not a family member) confirming date and cause of death ☐

7. Policyholder to complete

Cheques will be automatically made payable to the policyholder named on your Certificate of Insurance.

Please sign here ✗

IMPORTANT NOTES

- The insurance is underwritten and administered by Allianz Insurance plc.
- If the claim form is being faxed, please retain all original copies of the claim form and receipts.
- Please use a separate claim form for each pet.
- Please send completed forms, including copies of all receipts to: KBIS Pet Insurance, Great West House (GW2), Great West Road, Brentford, Middlesex TW8 9DX.

Allianz Insurance plc underwrites the policy. Allianz Insurance plc is authorised and regulated by the Financial Services Authority (FSA). Allianz Insurance plc's FSA Register number is 121849. This can be checked by visiting the FSA website at www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234.

INCOMPLETE CLAIM FORMS WILL BE RETURNED TO THE POLICYHOLDER