

Veteran Horse Insurance

Policy Wording



THE INSURANCE
Emporium

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IMPORTANT THINGS TO KNOW ABOUT THIS POLICY

Who is it for?

This insurance is for people who primarily want to cover their **horse** for its death from an **external accidental visible injury** or colic, or if it strays and is not found within 90 days.

What do I need to know?

The policy is made up of a number of important documents:

- IPID (Insurance Product Information Document) – this is a summary of the main coverage and exclusions
- policy wording – this details all coverage and exclusions
- **policy schedule** – this shows **your** cover and chosen Optional Benefits

Note: we are only liable up to the limit of cover shown in the **policy schedule**.

Important Note: the IPID and policy wording are master documents, showing all coverage and exclusions.

What do I need to do?

You must look at the **policy schedule** to see which features of cover are yours.

It is up to **you** to make sure the cover meets **your** needs; **you** must tell **us** immediately if this is not so.

You must keep to the terms of the policy otherwise it could become void, or **we** may not accept liability for a claim.

What am I agreeing to?

By entering into or renewing this policy, **you** are confirming the **horse** does not have an **injury, illness, or condition** (including previous bouts of colic), and is not displaying any **clinical signs** of an **injury, illness, or condition** except those **you** have already told **us** about.

What should I tell you?

In short, tell **us** everything and do it before **we** enter into this contract or renew it with **you**. **You** must tell **us** about every event, fact, or occurrence that might influence **our** decision to enter into or renew this contract of insurance; and, if so, on what terms. If **you** are in any doubt about whether a fact is material or not, **you** should always tell **us**.

What am I covered for?

We only cover damage or loss occurring in the United Kingdom, Channel Islands, and Isle of Man during the **policy duration**.

Where am I covered if someone makes a claim against me?

We cover liability arising in the United Kingdom, Channel Islands, and Isle of Man only.

CANCELLATION

You can cancel at any time by notifying **our** customer contact team. **We** may make an administration charge for cancellation.

If **you** cancel **your** policy within the first 14 days and have not made a claim, **we** will provide a full refund of premium.

Yearly policy duration: **We** will refund the part of **your** premium which applies to the remaining **policy duration** (as long as **you** have not made a claim, or no claim has been made against **you**).

Lunar or Calendar monthly policy duration: We will not collect any further lunar or calendar monthly payments. We may cancel this insurance by sending **you** seven days' notice to **your** last known email or postal address.

CHARGES OR DEDUCTIONS

- £3.99 – if **you** pay by direct debit or credit/debit card and **you** default on any premium payment.
- £10 administration fee for any changes made after the first 14 days, or **we** cancel, or reinstate the policy.
- Any amount due to **us** from **your** claim settlement.

WHAT HAPPENS WHEN MY POLICY RENEWS?

Automatic renewal

You must make each premium payment for continual cover to remain in force; **we** will automatically renew the policy, unless:

- **you** ask **us** not to renew;
- **you** or anyone acting on **your** behalf is rude or aggressive towards **our** team members, or defrauds or attempts to defraud **us**, or fails to take specific precautionary measures that **we** ask **you** to take;
- **we** choose not to for any other valid reason.

Will there be any changes to my policy?

When **we** renew **your** policy, **we** may make changes that **we** believe, in good faith, are appropriate for the type of policy **you** hold with **us**, and will produce an overall benefit for **you**. These changes may include the price of the policy, the range of cover, the available benefits, or the excesses payable. As a result of these changes the price, range of cover, benefits, or excesses may go up, stay the same or go down and there is no limit to the amount of change.

We might also make such other changes which **we** believe, in good faith, **we** have a valid reason to make such as to make the terms of the policy clearer (without reducing or restricting **your** rights in a material way), or because the law, or **our** regulators' rules have changed, or to reflect changes in **our** own costs, or other economic considerations.

If **we** want to change **your** policy, **we** will give **you** full written details, at least 21 days before they will take effect and **you** have the right to tell **us**, within 14 days of receiving them, if **you** do not want **us** to make these changes. If **you** exercise this right, **we** might choose to renew **your** policy without making the changes, renew **your** policy on different terms, or not renew **your** policy at all.

We may also, for business reasons, stop offering these policies at any time. **We** may do this if, for example, the law changes, **our** regulators' rules change, the economy changes, or **our** circumstances change, and **we** no longer believe that **we** can offer a competitive product, a useful product, or a product that offers good value for money, and still make a profit. **We** may also do this if (for example) the number of policies **we** sell falls, or **we** think it is likely to fall, to such an extent that it no longer makes economic sense for **us** to sell these particular policies, or policies of this kind. This might mean, for example, that **we** cannot enter or renew a policy when **you** ask **us** to do so.

If my policy doesn't renew, when does it end?

The policy will automatically end when:

- the **policy duration** expires
- the date **you** fail to pay **your** premium
- the date **you** cancel the policy
- the date **we** cancel the policy

DATA PROTECTION NOTICE

We take **your** privacy very seriously; **we** hold data in accordance with the current data protection legislation and regulations. **We** will use any personal information, including personal sensitive information as defined in the Data Protection Act 2018, for the purpose of dealing with **your** claim. It will also be used, if required, for the purpose of administrating and underwriting the policy, providing information and assistance, and to update **our** records.

Please note that telephone calls may be recorded for training and monitoring purposes. **We** can only discuss **your** policy with **you** directly. If **you** would like someone else to act on **your** behalf, please inform **us** so **we** can update **your** records accordingly. Unless **you** tell **us** otherwise, **we** may use **your** details to help improve **our** services through customer surveys and to keep **you** informed about **our** products, services, and offers via email, post, or telephone. If **you** would prefer not to receive such communications, please let **us** know. **We** may also share **your** information with professional advisers engaged by **us**, including consultant vets, claims investigators, and loss adjusters, where necessary for the administration of **your** policy, the handling of claims, or to fulfil **our** legal and regulatory obligations.

For full information on how **we** will process **your** data, please visit www.theinsuranceemporium.co.uk/privacy-policy

FRAUD PREVENTION

If at any time **we** receive or become aware of information giving rise to concerns regarding any matter relevant to the policy, **we** reserve the right to undertake further enquiries and investigations such as **we** deem reasonably necessary. **We** may share such information, where appropriate and in accordance with applicable data protection and privacy laws, with reinsurers, regulatory and supervisory authorities, law enforcement or fraud prevention agencies, professional advisors engaged by **us** (including consultant vets, claims investigators, and loss adjusters), and other insurers or industry bodies where necessary for the prevention of fraud, risk assessment, or for fulfilling legal or regulatory obligations. **We** will act reasonably and proportionately in how **we** use and share such information and will take all reasonable steps to protect **your** confidentiality and any third parties involved.

COMPLAINTS

Who do I complain to?

We always strive to give **you** the best possible service, but if **you** do have any questions or concerns either about the insurance or the handling of **your** claim, **you** should follow **our** complaints procedure by addressing **your** written complaint to the Chief Experience Officer:

Customer Experience Department | The Insurance Emporium | Thorpe Underwood Hall | Ouseburn | York | North Yorkshire | YO26 9SS
e: feedback@emporium.co.uk
t: 03300 244 007

We will acknowledge **your** complaint within five working days and issue **you** with a final response within eight weeks from the date of receipt of **your** complaint.

What if we cannot reach an agreement?

You can refer **your** complaint to the Financial Ombudsman Service within six months of the date of **our** final response:

Financial Ombudsman Service | Exchange Tower | London | E14 9SR
e: complaint.info@financial-ombudsman.org.uk
t: 0800 023 4567 or 0300 123 9 123

QUICK GUIDE TO THE COLOURED PANELS

The text in the coloured panels provides important notes, settlement information, mandatory conditions, or things to note about those sections of cover. They are designed to help **you** understand the main points quickly, they do not replace or override the full policy wording. Please refer to the main policy text for the full terms and conditions.

Important notes about the policy section

How the **settlement** will be determined

Conditions of the policy section

Things to Note about the policy section

SIGNIFICANT WORDS AND PHRASES

accident

an event that happens completely by chance with no planning or deliberate intent

accident(ly) damage(d)

sudden and unexpected damage that is not deliberate and caused by violent external means which makes the item unusable

bilateral condition

any **condition** affecting body parts of the **horse** which has two, one each side of the body such as (but not limited to) ears, eyes, cruciate ligaments, hips, and patellae

note: when applying a benefit or exclusion bilateral conditions are considered as one **condition**

clinical signs

changes in the **horse's** normal healthy state, condition, appearance, its bodily functions, or behaviour

complementary therapy

acupuncture, homeopathic or herbal medicines, hydrotherapy, laser treatment, physiotherapy, remedial farriery, shockwave, and ultrasound therapies

note: all complementary therapy must be carried out by **your vet** or a qualified practitioner (who is a member of a recognised association) recommended by **your vet**

condition

all **clinical signs** of **injury** or **illness** resulting in the same diagnosis regardless of the number of incidents or the areas of the body affected

equestrian activity

the activities for which **you** are insured: advanced eventing, advanced horse trials, arab racing, barrel racing, breeding, cross country, dressage, driving, foals over 30 days, gymkhanas, hacking, heavy horses, horse ball, horses at grass, hunter trials, hunting (including drag hunting), jump cross, long distance riding (under 25 miles), long

distance/endurance riding (over 25 miles), mounted games, point-to-point, polo, polo crosse, Pony Club & Riding Club (excluding cross country), retired horses, rodeo, showing, show jumping, team chasing, trec, trotting racing, vaulting, western riding

excess

the amount **you** must contribute to every claim. If claims are made under multiple sections, a separate excess applies to each claim. An excess is payable for each unrelated **external accidental visible injury**

external accidental visible injury

external visible physical damage or trauma caused by an **accident**

family

husband, wife, civil partner, partner, parents, grandparents, brothers, sisters, children, and grandchildren

horse

the horse identified in the **policy schedule**

illness

physical disease, sickness, infection, or failure not caused by an **injury**

injury, injured

physical damage or trauma caused by an **accident**

market value

the price paid for a **horse** of similar ability, age, breeding, bloodline, or sex, immediately before the **external accidental visible injury** occurred

material fact

any event, fact or occurrence which would influence a decision, made by any party, as to whether or not to enter into a contract of insurance or renew it

our consultant vet

the **vet** with whom **we** consult to review the **horse's** clinical history and emergency **treatment**

policy duration

<u>duration</u>	<u>length</u>	<u>premiums paid</u>	<u>auto renew</u>
year	365 days	once a year	yes
lunar month	28 days	every 28 days	yes
calendar month	calendar month	every calendar month	yes

policy schedule

shows the purchased sections of cover and the maximum amount available under each section

post mortem

an examination carried out by a **vet** following the death of the **horse**, including but not limited to establishing the **horse's** identity (verified against the **horse's** passport or microchip records), and, identifying the cause of death or confirming the reason for euthanasia

proof of purchase

the original purchase receipt and any other documentation required to prove ownership

second opinion

the examination and evaluation of the **horse** by a second **vet** to verify or challenge the diagnosis or **treatment** plan made by the first **vet**

stolen, theft

the unlawful taking of the **horse** against **you** will by another party with the intention of permanently depriving **you** of it

treatment, treated

any advice, consultation, diagnostics, examination, investigation, medication, nursing care, surgery, tests, or x-rays provided by a veterinary practice or qualified practitioner recommended by **your vet**

vet

veterinary surgeon registered with the Royal College of Veterinary Surgeons

vet's fees

the customary and essential amount typically charged by **your vet** or a qualified practitioner (who is a member of a recognised association) recommended by **your vet** for emergency **treatment**.

we, our, us

The Equine and Livestock Insurance Company Limited

you, your

the person named in the **policy schedule**

1. DEATH, THEFT, OR STRAYING

A. EMERGENCY EUTHANASIA

What is covered

death or euthanasia: the external accidental visible injury is of such a severity that the **horse** dies or, in the opinion of the attending **vet**, requires immediate euthanasia without referral to **us**.

settlement: price paid or **market value**, whichever is less (up to the maximum amount shown in the **policy schedule**).

Conditions

All of the following conditions must be satisfied for **us** to consider any claim under this section:

1. The **horse** must suffer an external accidental visible injury which is so severe that emergency euthanasia is required to relieve the **horse's** excessive and unrelievable pain and suffering; and
2. The attending **vet** must certify that at the time and place they examined the **horse**, no other **treatment** options were available to relieve or alleviate the excessive pain and suffering caused by the external accidental visible injury; and
3. The attending **vet** must certify that at the time and place they examined the **horse**, the **horse's condition** was such that it could not be safely and/or humanely transported to a place where **treatment** might be available to relieve or alleviate the excessive pain and suffering caused by the external accidental visible injury; and
4. Following euthanasia, **you** must, at **your** own expense, obtain a **post mortem** unless **we** choose to waive this **condition**.

Important Note

You must submit fully completed claims forms, full medical history, and detailed veterinary reports, including the attending **vet's** certification that no other options for **treatment** were available, along with the **post mortem** report (if required) to **us**.

Evidence of the **horse's** value must be submitted and may include, but is not limited to, the vaccination card, passport, **proof of purchase**, or recent independent valuation.

Things to note

1. When the **horse** is **injured you** must immediately have a **vet** treat the **horse** at **your** own expense. **You** must allow the **vet** to take the **horse** away for **treatment** if it is appropriate.
2. Payment for the **horse's** death will be only made to the **horse's** legal owner.
3. In the case of the **horse** being a mare, there is no insurance cover for any embryo within the **horse** or any of her foals.
4. **We** may appoint a claims investigator or loss adjuster to consider **your** claim and establish the **horse's market value**. The cost of this appointment will be deducted from **your** settlement.

B. THEFT OR STRAYING

What is covered

The **horse** is **stolen**, or strays, and is not returned to **you** within 90 days.

settlement: price paid or **market value**, whichever is less (up to the maximum amount shown in the **policy schedule**).

Conditions

1. In order to make a **theft** or straying claim, **you** must have suffered no thefts, attempted thefts, or threats of any nature against **you** or the **horse** during the twelve months immediately prior to the **horse's** loss.
2. **You** must, as soon as possible, report the **theft** or disappearance of the **horse** to the police and **you** must follow their recommendations strictly, except that in no circumstances whatsoever may **you** pay, agree to pay, or promise to pay a ransom, bribe, or payoff, or give similar assurance of such nature to any person.

Things to note

1. Payment for the **horse's** loss by **theft** or straying will only be made to the **horse's** legal owner.
2. In the case of the **horse** being a mare, there is no insurance cover for any embryo within the **horse** or any of her foals.
3. If a **theft** or straying claim is made and the **horse** is subsequently recovered, **we** have the right, if **we** so elect, to take ownership of and sell the **horse**. If **we** do not elect to do this, the owner must return the amount paid in settlement of the claim and retain possession of the **horse**.
4. If a **theft** and straying claim is made and the **horse** is subsequently recovered, and **we** do not elect to take ownership of the **horse**, there can be no abandonment of the **horse** to **us**.
5. **We** may appoint a claims investigator or loss adjuster to consider **your** claim and establish the **horse's market value**. The cost of this appointment will be deducted from **your** settlement.

SECTION 1 - WHAT IS NEVER COVERED

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Death occurring from an **illness**.
3. Death where euthanasia was performed without our permission unless **you** have complied with the Conditions in Section A. EMERGENCY EUTHANASIA.
4. **Theft** or straying under Section B. THEFT OR STRAYING until 90 days after the loss is reported to **us** and only then in the event the **horse** has not been recovered during that period and **you** have complied with the Conditions in Section B. THEFT OR STRAYING.
5. Death occurring from an **external accidental visible injury** which:
 - a. first showed **clinical signs**, happened, or existed before the policy began; or
 - b. is the same as, or has the same diagnosis as, or is caused by, related to, or results from an **external accidental visible injury**, or any **clinical signs** shown, before the policy began.
6. Death occurring from, or costs relating to, the **horse** sustaining an **external accidental visible injury** within 14 days of the policy beginning.
7. Death occurring more than 365 days after the **horse** sustained an **external accidental visible injury**.
8. Death occurring after **we** stop receiving **your** premium or the policy ends.
9. Death occurring from, or costs relating to, the **horse** sustaining an **external accidental visible injury** whilst **you** were participating in, or preparing for, an activity not specified as an **equestrian activity**.
10. Death occurring where **your vet** or **our consultant vet** considers the **horse's injury** was able to be **treated**.
11. Any amount for a mare's unborn foetus, embryo, or foal.
12. Death occurring from, or costs relating to, medication unless it was administered by, or under the direction of, a **vet**.
13. Death occurring from, or costs relating to, the **horse** being overweight or prescription diets.
14. Putting the **horse** to sleep:
 - a. for financial reasons; or
 - b. because of vicious tendencies or behavioural problems; or
 - c. due to law, regulation, a government department, a public authority or similar, or order related to a notifiable disease.
15. Death occurring from, or costs relating to, the **horse** showing vicious tendencies or behavioural problems.
16. Death occurring from, or costs relating to, an **external accidental visible injury** sustained from barbed wire, stock fencing, or plain wire fencing.
17. Costs of putting the **horse** to sleep.
18. Costs of disposal unless Section 5 DISPOSAL COSTS is chosen.
19. Costs of stabling, grazing, or feeding the **horse**.
20. Costs not supported by a receipt / invoice showing full details of the costs incurred.

21. Costs of diagnostic testing unless there is a clear symptom or clinical sign present.
22. Death occurring, or costs arising, from an **external accidental visible injury** sustained outside of the United Kingdom, Channel Islands, or Isle of Man (including sea crossings).
23. Costs of buying or hiring equipment or machinery.
24. Costs of organ transplants.
25. Veterinary administration costs including but not limited to the prescription of medication not dispensed by the **vet**, dispensing fees, clinical waste fees, handling fees, insurance administration fees, postage and packaging, and any third-party fees or charges incurred in the investigation or assessment of **your** claim, including the cost of freezemarking.
26. Fees for reuseable surgical equipment.
27. **Theft** by person(s) to whom **you** entrusted the **horse**.
28. **Your excess**.

OPTIONAL BENEFITS

2. VET'S FEES

What is covered

vet's fees: treatment and/or **complementary therapy** following an **external accidental visible injury**.

vet's fees settlement: up to the maximum amount shown in the **policy schedule**.

What is not covered

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Costs arising from an **illness**.
3. Costs arising from an **external accidental visible injury** which:
 - a. first showed **clinical signs**, happened, or existed before the policy began; or
 - b. is the same as, or has the same diagnosis as, or is caused by, related to, or results from an **external accidental visible injury**, or any **clinical signs** shown, before the policy began.
4. Costs arising from the **horse** sustaining an **external accidental visible injury** within 14 days of the policy beginning.
5. Costs incurred, **treatment** or **complementary therapy** received, or prescribed for use, more than 365 days after the **horse** sustains an **external accidental visible injury**.
6. Costs arising, **treatment** or **complementary therapy** received, or prescribed for use after **we** stop receiving **your** premium or the policy ends.
7. Costs arising from the **horse** sustaining an **external accidental visible injury** whilst **you** were participating in, or preparing for, an activity not specified as an **equestrian activity**.
8. Any amount for a mare's unborn foetus, embryo, or foal.
9. Costs arising from medication unless it was administered by a **vet** or under a **vet's** direction.
10. Costs arising from the **horse** being overweight or prescription diets.
11. Costs arising from the **horse** showing vicious tendencies or behavioural problems.
12. Costs arising from an **external accidental visible injury** sustained from barbed wire, stock fencing, or plain wire fencing.
13. Costs of putting the **horse** to sleep.
14. Costs of disposal unless Section 5 DISPOSAL COSTS is chosen.
15. Costs of transportation or livery unless Section 4 REFERRAL VET TRANSPORTATION & LIVERY is chosen.
16. Costs of livery, stabling, grazing, or feeding the **horse**.
17. Costs not supported by a receipt / invoice showing full details of the costs incurred.

18. Costs arising from diagnostic testing unless there is a clear symptom or clinical sign present.
19. Costs arising from an **external accidental visible injury** sustained outside of the United Kingdom, Channel Islands, or Isle of Man (including sea crossings).
20. Costs of buying or hiring equipment or machinery.
21. Costs of organ transplants.
22. Veterinary administration costs including but not limited to the prescription of medication not dispensed by the **vet**, dispensing fees, clinical waste fees, handling fees, insurance administration fees, postage and packaging, and any third-party fees or charges incurred in the investigation or assessment of **your** claim, including the cost of freezemarking.
23. Fees for reuseable surgical equipment.
24. **Your excess.**

Conditions

1. **We** will not pay for any more **treatment** and/or **complementary therapy** on the earliest of:
 - a. reaching the maximum amount shown in the **policy schedule**, or
 - b. 365 days after the **horse** is **injured**
2. To continue to claim for **treatment** and/or **complementary therapy**, **you** must pay the premium. If **you** stop paying, cancel the policy, or decide not to renew, the policy ends preventing **you** from making any further claims

Important Note

You must submit fully completed claims forms, full medical history, and detailed veterinary reports.

Things to note

1. When the **horse** is **injured** **you** must immediately have a **vet** treat the **horse** at **your** own expense. **You** must allow the **vet** to take the **horse** away for **treatment** if it is appropriate.
2. Where **we** consider (a) **vet's** fees appear greater than standard fees charged by a **vet**, and/or (b) emergency **treatment** may not have been required or may have been excessive, **we** reserve the right to obtain a **second opinion** from **our consultant vet** and where there is a dispute, **we** will pay only those **vet's** fees deemed reasonable and essential by **our consultant vet**.

3. COLIC - DEATH & VET'S FEES

What is covered

vets' fees: **treatment** of and/or **complementary therapy** for, colic

death or euthanasia: the colic is of such a severity that the **horse** dies or, in the opinion of the attending **vet**, requires immediate euthanasia without referral to **us**.

vet's fees (maximum benefit) settlement: up to the maximum amount shown in the **policy schedule**; there is time limit on how long can be taken to reach the maximum amount.

Note: to continue to claim until the maximum benefit is reached, **you** must keep paying **your** premium. If **you** stop paying, cancel the policy, or decide not to renew it, **you** will lose the unclaimed part of the maximum benefit. Once the maximum benefit is exhausted **we** will not pay for any more **treatment** whether the policy has renewed or not.

death or euthanasia settlement: price paid or **market value**, whichever is less (up to the maximum amount shown in the **policy schedule**).

What is not covered

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Death occurring, or costs arising, from an **illness**.
3. Death where euthanasia was performed without our permission unless **you** have complied with the Conditions in Section 3 COLIC - DEATH & VET'S FEES.
4. Death occurring, or costs arising from, colic which:
 - a. first showed **clinical signs**, happened, or existed, before the policy began; or
 - b. is the same as or has the same diagnosis as or is caused by, related to or results from, colic or **clinical signs** shown, before the policy began.
5. Death occurring, or costs arising from, colic showing **clinical signs** within 14 days of the policy beginning.
6. Death occurring more than 365 days after colic first showed **clinical signs**.
7. Death occurring, or costs arising, from colic of a **horse** aged over 24 years and 364 days at the date in the **policy schedule** as the date the policy began or underwent annual review.
8. Death occurring, costs arising, **treatment** received or prescribed for use, after **we** stop receiving the premium or the policy ends.
9. Death occurring, or costs arising, where colic is excluded from cover as shown in the **policy schedule** or notified separately by letter or email.
10. Death occurring, or costs arising, from the **horse** showing **clinical signs** of colic whilst taking part in or preparing for, an activity not specified as an **equestrian activity**.
11. Death occurring, or costs arising, where **your vet** or **our consultant vet** considers the **horse's** colic was able to be **treated**.
12. Any amount for a mare's unborn foetus, embryo, or foal.
13. Death occurring, or costs arising, from medication unless it was administered by, or under the direction of, a **vet**.
14. Death occurring, or costs arising, from, the **horse** being overweight or prescription diets.
15. Putting the **horse** to sleep:
 - a. for financial reasons; or
 - b. because of vicious tendencies or behavioural problems; or
 - c. due to law, regulation, a government department, a public authority or similar, or order related to a notifiable disease.
16. Death occurring, or costs arising, for routine or preventative **treatment** recommended by **your vet** to prevent colic.
17. Costs of putting the **horse** to sleep.
18. Costs of disposal unless Section 5 DISPOSAL COSTS is chosen.
19. Costs of transportation or livery unless Section 4 REFERRAL VET TRANSPORTATION & LIVERY is chosen.
20. Costs of livery, stabling, grazing, or feeding the **horse**.
21. Costs not supported by a receipt/invoice showing full details of costs incurred.
22. Costs arising from undergoing diagnostic tests unless there is a clear symptom or clinical sign present.

23. Costs arising from **treatment** of colic first showing **clinical signs** outside of the United Kingdom, Channel Islands, or Isle of Man (including sea crossings).
24. Costs of buying or hiring equipment or machinery.
25. Costs of organ transplants.
26. Veterinary administration costs including but not limited to the prescription of medication not dispensed by the **vet**, dispensing fees, clinical waste fees, handling fees, insurance administration fees, postage and packaging, and any third-party fees or charges incurred in the investigation or assessment of **your** claim, including the cost of freezemarking.
27. Fees for reusable surgical equipment.
28. **Your excess.**

Conditions

All of the following conditions must be satisfied for **us** to consider any claim under this section:

1. The **horse's** colic must be so severe that emergency euthanasia is required to relieve the **horse's** excessive and unrelievable pain and suffering; and
2. The attending **vet** must certify that at the time and place they examined the **horse**, no other **treatment** options were available to relieve or alleviate the excessive pain and suffering caused by colic; and
3. The attending **vet** must certify that at the time and place they examined the **horse**, the **horse's condition** was such that it could not be safely and/or humanely transported to a place where **treatment** might be available to relieve or alleviate the excessive pain and suffering caused by colic; and
4. Following euthanasia, **you** must, at **your** own expense, obtain a **post mortem** unless **we** choose to waive this **condition**.

Important Note

You must submit fully completed claims forms, full medical history, and detailed veterinary reports, including the attending **vet's** certification that no other options for **treatment** were available, along with the **post mortem** report (if required) to **us**.

In the event of the **horse's** death, evidence of the **horse's** value must be submitted and may include, but is not limited to, the vaccination card, passport, **proof of purchase**, or recent independent valuation.

Things to note

1. When the **horse** first shows **clinical signs** of colic **you** must immediately have a **vet** treat the **horse** at **your** own expense. **You** must allow the **vet** to take the **horse** away for **treatment** if it is appropriate.
2. Where **we** consider (a) **vet's** fees appear greater than standard fees charged by a **vet**, and/or (b) emergency **treatment** may not have been required or may have been excessive, **we** reserve the right to obtain a **second opinion** from **our consultant vet** and where there is a dispute, **we** will pay only those **vet's** fees deemed reasonable and essential by **our consultant vet**.
3. Payment for the **horse's** death will be only made to the **horse's** legal owner.
4. In the case of the **horse** being a mare, there is no insurance cover for any embryo within the **horse** or any of her foals.
5. **We** may appoint a claims investigator or loss adjuster to consider **your** claim and establish the **horse's market value**. The cost of this appointment will be deducted from **your** settlement.

4. REFERRAL VET TRANSPORTATION & LIVERY

What is covered

Transportation and livery costs whilst the **horse** is **treated** by a referral **vet**.

settlement: up to the maximum amount shown in the **policy schedule**.

What is not covered

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Costs where a **vet's** fees claim under Section2 VET'S FEES or Section3 COLIC - DEATH & VET'S FEES is declined.
3. Costs not supported by a receipt / invoice showing full details of the costs incurred
4. **Your excess**.

5. DISPOSAL COSTS

What is covered

Removal and disposal of the **horse's** body following its death.

settlement: reasonable costs of removal and disposal (up to the maximum amount shown in the **policy schedule**).

What is not covered

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Costs where a claim under Section 1 DEATH, THEFT, OR STRAYING or Section 2 VET'S FEES or Section 3 COLIC - DEATH & VET'S FEES is declined.
3. Costs not supported by a receipt / invoice showing full details of the costs incurred.
4. **Your excess**.

6. SADDLERY & TACK

Significant words and phrases

accidental(ly) damage(d)

sudden and unexpected damage that is not deliberate and caused by violent external means which makes the item unusable

cosmetic damage

non-structural damage that does not affect usage, including but not limited to dents, marks, or scratches

Significant words and phrases	
depreciation period	wear and tear deduction
up to 3 years from new	10%
4 years from new	20%
5 years from new	30%
6 years from new	35%
7 years from new	40%
8 years from new	45%
9+ years from new	50%
age is determined from date of manufacture	
forcible and violent entry	entry to a property that clearly shows damage to the lock, building, room, or vehicle, caused as a direct result of theft
saddlery & tack	bits, bridles, harnesses, saddles, stirrup irons and leathers, and other riding tack restricted specifically to those items normally attached to the horse whilst being used for an equestrian activity
security requirements	<u>APPENDIX ONE: SECURITY REQUIREMENTS</u>
stolen, theft	the unlawful taking of an insured item against your will by another party, with the intention of permanently depriving you of it, and it not being found within 28 days of being reported to us

What is covered

Your saddlery & tack is stolen; or accidentally damaged whilst participating in, or preparing for, an **equestrian activity**

settlement: price paid less **depreciation**, sum insured, or **market value**, whichever is less (up to the maximum amount shown in the **policy schedule**).

What is not covered

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Any claim where the **security requirements** in APPENDIX ONE: SECURITY REQUIREMENTS have not been complied with.
3. **Theft** unless involving **forcible and violent entry** and **you** have complied with APPENDIX ONE: SECURITY REQUIREMENTS.
4. Any claim arising from participating in, or preparing for, any activity not specified as an **equestrian activity**.
5. Any amount over £1,000 for any single item of **saddlery & tack**.
6. Any form of **cosmetic damage**.
7. **Theft** where the **saddlery & tack** is loaned or hired out by **you** to any person other than a member of **your** immediate **family**.
8. Unexplained **theft**.

9. **Theft** unless:
 - a. **you** have reported it to the nearest police authority as quickly as possible, preferably within 24 hours of discovery; and
 - b. **you** have obtained a crime reference number and details of the police station the crime was reported to; and
 - c. **you** did everything **you** reasonably could to recover the **stolen** property.
10. **Theft** by a person(s) to whom **you** entrusted the **saddlery & tack**.
11. **Theft** or **accidental damage** that is not from a known place, or that cannot be identified as occurring within a definite 24-hour period.
12. The cost of repair and replacement which improves the **saddlery & tack** beyond the **condition** they were in before they were **stolen** or **accidentally damaged**.
13. Any reduction in the **market value** of the **saddlery & tack** following any repair whether or not undertaken as a result of any claim under this policy.
14. Loss or damage resulting from **you** not following the manufacturer's instructions, abusing, or neglecting the **saddlery & tack**.
15. Any claim where the **saddlery & tack** is left on public transport.
16. **Your excess**.

Conditions

All **saddlery & tack** must be properly fitted and kept in a good state or repair.

Things to note:

1. **We** have the right to choose what action to take in case of a claim and **we** may arrange to:
 - a. repair the damage; or
 - b. replace what was lost or **stolen** or damaged beyond economical repair; or
 - c. pay **you** for the amount of loss or damage.
2. **We** may decide to appoint a claims investigator and/or loss adjuster to consider **your** claim.

7. PUBLIC LIABILITY (STANDARD)

What is covered

Your legal liability to others for damages and costs arising from the death or bodily injury of any other person, or loss or damage to property belonging to any other person, caused by an incident involving the **horse** and arising from a single event or a series of events consequent on one original cause.

Important Note: references to "**you**" in this section refers to anyone riding, handling, caring for, or interacting with, the **horse** with **your** permission and consent.

settlement: amounts **you** become legally liable to pay, and/or costs and expenses incurred with **our** written consent defending claims made against **you**, arising within the United Kingdom, Channel Islands, and Isle of Man (in the aggregate, up to the maximum amount shown in the **policy schedule**).

What is not covered

1. Any amount greater than the maximum amount shown in the **policy schedule**.

2. Any claim where, at the date of the incident giving rise to the claim, **you** are under 5 years old or over 75 years of age.
3. Any liability arising from participating in, or preparing for, any activity not specified as an **equestrian activity**.
4. Any liability arising where the **horse** has previously displayed aggressive behaviours towards other animals, has bitten or kicked, or attempted to bite or kick, other animals or humans.
5. Death or bodily injury, loss of or damage to property, sustained in connection with the **horse** working, or being used in (or in connection with) any trade, business, or profession, or the **horse** being used for hire or reward.
6. Death or bodily injury, loss of or damage to property, as a result of the **horse's** interaction with other animals.
7. Death or bodily injury, loss of or damage to property, as a result of any person riding, handling, or interacting with, the **horse** without **your** permission or consent.
8. The proportion of any loss not directly attributable to the **horse**.
9. Death or bodily injury to, loss of or damage to any property owned, held in trust, in charge of, or under the control of:
 - a. **you**;
 - b. the owner of the **horse**;
 - c. any member of **your** household;
 - d. any person residing with **you** whether as a cohabitee, tenant or on any other basis;
 - e. any member of **your family**;
 - f. any guest(s);
 - g. **your** agent or licensee;
 - h. any person in the course of their employment with **you**, or under a contract of service or apprenticeship;
 - i. **your** employer;
 - j. any person with whom **you** have a contractual or business relationship (including livery yard owners / operators).
10. Any event which results from **your** deliberate act or omission, and which could reasonably have been expected by **you** having regards to the nature and circumstances of such an act or omission.
11. Liability created by an agreement which would not have existed in the absence of the agreement.
12. Death or bodily injury, loss of or damage to property arising as a result of the **horse** being prepared for harnessing, being harnessed or breaking free of harnessing to a **horse** drawn vehicle if the **horse** drawn vehicle is not insured with **us**.
13. Any claim arising whilst the **horse** drawn vehicle is being transported or towed by a motor vehicle, is attached to, or becomes detached from a motor vehicle.
14. Death or bodily injury, loss or damage to property if the **horse** is ridden at a riding establishment or for professional lessons by anyone other than **you**.
15. Damage to gates, walls, fences, and crops occurring while the **horse** is being ridden, driven, or led.
16. Death or bodily injury, loss of or damage to property, as a result of a stallion serving or attempting to serve a mare or from any activity involving artificial insemination.
17. **Your excess**.

Things to note

1. **You** must not admit responsibility, offer, promise, pay, or agree to pay any claim or negotiate with any other persons following an incident.
2. **You** must inform **us** immediately of any actual (i) impending prosecution, (ii) inquest, (iii) fatal inquiry, or (iv) civil legal proceedings, or if any circumstances that are reasonably likely to give rise to such a prosecution, inquest, inquiry, or legal proceedings. and **you** must send **us** every piece of correspondence and document **you** receive without replying to any of them.
3. **You** must allow **us** to:
 - a. take over and conduct in **your** name the defence or settlement of any claim; and
 - b. take proceedings in **our** name, at **our** own expense and for **our** own benefit, to recover compensation or secure an indemnity from any third party; and
 - c. **you** shall give **us** all information and assistance **we** require to do this.
4. For any claim or series of related claims, **we** may, at **our** discretion, pay **you** either the maximum amount specified in the **policy schedule** or a lesser amount that fully settles the claim. Upon making such payment, **we** will have no further liability in connection with the claim, except for third-party costs and expenses incurred up to the date of payment, and only up to the maximum amount stated in the **policy schedule**.

SIGNIFICANT WORDS AND PHRASES APPLYING TO SECTIONS 8 & 9

accident

An unforeseen, sudden, and unintended accident, resulting in **your** sustaining **bodily injury** solely and independently of any other cause

bodily injury

Injury sustained in an **accident** solely and independently of any other cause

loss of hearing

Complete and irrecoverable loss of hearing in both ears

loss of limbs

Physical severance or complete irrecoverable loss of use of one or both hands at or above the elbow or of one or both feet above the knee

loss of sight

Complete and irrecoverable loss of sight in one or both eyes

medical practitioner (doctor)

A doctor registered with a licence to practice from the General Medical Council (GMC)

medical practitioner (dentist)

A dentist with a licence to practice from the General Dental Council (GDC)

pre-existing condition

An injury or illness which first showed clinical signs, happened, or existed before **your** policy began; or is the same as or has the same diagnosis as or is caused by, related to or results from, an injury or illness, or clinical signs shown, before **your** policy began

total permanent disablement

A state of disablement that wholly and continuously incapacitates **you** from pursuing education or engaging in any occupation or business activity of any nature, which endures uninterrupted for a period of 365 consecutive days

from the date of the incident, and is, at the conclusion of that period, deemed medically irreversible and without prospect of functional improvement

8. PERSONAL ACCIDENT

What is covered

You sustain a **bodily injury** as a direct result of an **accident** whilst riding, handling, caring for, or interacting with, the **horse**, and such injury is the sole and independent cause of death, **loss of sight, loss of hearing, loss of limbs, or total permanent disablement**.

Important Note: references to "**you**" in this section refer to anyone riding, handling, caring for, or interacting with, at the date of the incident giving rise to the claim.

settlement: up to the maximum amount shown in the **policy schedule**.

9. DENTAL TREATMENT

What is covered

You sustain a **bodily injury** as a direct result of an **accident** whilst riding, handling, caring for, or interacting with, the **horse**, and such injury is the sole and independent cause of damage to **your** mouth and / or teeth.

Important Note: references to "**you**" in this Section refers to anyone riding, handling, caring for, or interacting with, the **horse** as at the date of the incident giving rise to the claim.

settlement: up to the maximum amount shown in the **policy schedule**.

CONDITIONS APPLYING TO SECTIONS 8 & 9

1. **We** must be notified of any **accident** as soon as reasonably practicable.
2. **You** must place yourself under the care of a **medical practitioner** as soon as reasonably possible following the occurrence of the **accident**.
3. Confirmation of the **bodily injury** must be provided by a **medical practitioner**, and it is **your** responsibility to obtain and bear the cost of this.
4. **We** reserve the right to appoint an independent **medical practitioner** to examine **you**. **You** are required to fully cooperate, including consenting to such examination and granting access to all relevant medical records and history. No benefit will be payable under this Section unless **our** appointed **medical practitioner** is allowed to conduct such examinations as often as may be reasonably necessary, to assess **your** condition.
5. If the effects of the **bodily injury** are aggravated by any **pre-existing** physical or medical condition, the amount payable under this Section will be limited to the amount that would reasonably have been payable had such a **pre-existing condition** not existed.

WHAT IS NOT COVERED IN SECTIONS 8 & 9

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Any claim where, at the date of the incident giving rise to the claim, **you** are under 5 years old or over 75 years of age.
3. Any claim for **your** death which is not verified by a death certificate.
4. Any claim arising from a **pre-existing condition**.
5. Any claim directly or indirectly consequent upon or contributed to by participation in dangerous activities.
6. Any claim directly or indirectly consequent upon or contributed to by:
 - a. neurosis, psychoneurosis, psychopathic, or mental diseases or disorders of any type;
 - b. AIDS or AIDS related complex however the syndrome has been acquired or may be named;
 - c. Influenza, notifiable disease, virus, bacteria, or contagion, or any derivation or variant thereof;
 - d. **your** committing or attempting to commit suicide or intentional self-inflicted **injury**;
 - e. **your** deliberate exposure to exceptional danger except in an attempt to save human life;
 - f. **your** own criminal act;
 - g. **your** being wholly or partly under the influence of alcohol;
 - h. **your** being wholly or partly under the influence of drugs other than those taken in accordance with **treatment** prescribed and directed by a **medical practitioner**, but not for the **treatment** of drug addiction;
 - i. pregnancy or childbirth;
 - j. any naturally occurring **condition** or degenerative process or any gradual decline in physical health;
 - k. any form of operational duties as a member of the armed forces or Army Reserve.
7. Any claim arising from participating in, or preparing for, an activity not specified within **your** chosen Type of **equestrian activity**.
8. Any claim where the **horse** has previously displayed aggressive behaviour towards other animals, has bitten or kicked, or attempted to bite or kick, other animals or humans.
9. Any event which results from **your** deliberate act or omission, and which could reasonably have been expected by **you** having regards to the nature and circumstances of such an act or omission.
10. Any claim arising as a result of the **horse** being prepared for harnessing, being harnessed, or breaking free of harnessing, to a **horse** drawn vehicle if the **horse** drawn vehicle is not insured with **us**.
11. **Your excess**.

THINGS YOU MUST ALWAYS DO

1. Take all reasonable precautions to prevent accidents, injury, loss, and damage and to minimise any claims under this policy.
2. The **horse** must have a general health check (and subsequent recommended **treatment**) every 12 months. If **you** do not have a general health check which could have detected an **external accidental visible injury** or colic it will invalidate any claim. Any general health check must be at **your** own cost.
3. The **horse** must have a dental check by a fully qualified BAEDT Equine Dental Technician (and subsequent recommended **treatment**) every 12 months. If **you** do not have a dental check which could have detected an **external accidental visible injury** or colic it will invalidate any claim. Any dental check must be at **your** own cost.

4. Have the **horse** wormed regularly and protect it from infectious and contagious disease by keeping it isolated.
5. The **horse** must be vaccinated and microchipped.
6. The **horse** must be kept in a secure area; any fences, gates, and enclosures must be capable of restraining the **horse** and must be kept closed and locked at all times. **You** must check the fences, barriers, paddock boundaries, and enclosures regularly and maintain them in good order. **You** must check all areas regularly for glass, nails, poisonous substances (such as ragwort, hemlock, deadly nightshade etc.) and other items that may cause a claim and remove them. Fences should be at least 1.25m (4ft) in height and of the following construction - post and rail wooden fencing, post and rail impact resistant plastic, post and rail solid uprights, flexi-rails (PVC or rubber coated webbing), post electric either electrical tape or wire. Stallion paddocks require a double fence line of 1.5m (5ft). The following are not sufficient barriers / paddock boundaries unless reinforced by the additional fencing set out above - banks and ditches.
7. Anyone claiming insurance under this policy must observe and fulfil all the terms, conditions and endorsements of the policy otherwise **we** may not be liable under the policy.
8. Co-operate fully and truthfully to give **us** any information **we** may need.
9. Notify **us** as soon as possible of any change in circumstances relevant to this policy. Failure to do so may invalidate the policy. **We** reserve the right to alter the terms of the policy immediately after **we** are notified of such changes.
10. All losses must be substantiated by **proof of purchase**. **You** must provide valuations, reports, information, etc at **your** own expense if **we** request it.
11. **You** must provide all information, explanations, proof of ownership, and other such evidence as **we** may reasonably require.

GENERAL THINGS YOU NEED TO KNOW

1. When **we** invite **you** to renew the policy **we** may, at **our** discretion alter premiums, cover, terms and conditions as **we** deem necessary for any reason including such factors as an item's age.
2. If the **horse** sustained an injury or suffered from colic that **you** did not tell **us** about when the policy began or underwent annual review, **we** will exclude cover for that injury from the date it occurred or from the date the colic first showed **clinical signs**.
3. **We** will not pay a claim (including public liability) caused by the **horse** bolting, rearing, straying, shying, biting, kicking, escaping, damaging property, attacking the general public, other **horse**, or animals if the **horse** has a history of doing one of more of these things.
4. Where **you** maliciously and/or recklessly fail to disclose a **material fact** when this policy starts, renews or when making a claim, **we** may (i) reject **your** claim, (ii) endorse the policy (iii) void the policy, (iv) retain **your** premium.
5. If any loss, damage or liability is insured by any other policy (or would be insured if this policy did not exist) **we** will not be liable for the whole claim. **We** will only pay anything over the amount which should have been paid under that policy (or policies) if this insurance had not been taken out.
6. **We** are liable only if **we** have received the correct premium before the start of each **policy duration** or within the credit period if **we** have allowed one to a broker or intermediary.
7. If any insured item consists of articles in a pair or set, the policy will not cover more than the value of any particular part or parts that are lost, destroyed, or damaged. **We** do not insure any special value that the article or articles may have as part of a pair or set, nor more than a proportionate part of the insured value of the pair or set.
8. This insurance will stop covering any item as soon as **you** sell it or part with any interest in it, whether temporarily or permanently.
9. If any information is provided in a foreign language, **you** are responsible for the cost of translation.

10. **Your** intermediary will not be or become **our** intermediary for giving notice about claims or any other matter. **We** will not be liable for any mistakes or omissions by an intermediary who has arranged the insurance on **your** behalf.
11. **We** can only discuss **your** personal details with **you**. If **you** would like anyone else to act on **your** behalf, please let **us** know.
12. The laws of England and Wales apply to this insurance contract and the language of the policy and all communications relating to it will be in English.

WHAT IS NEVER COVERED

1. Any amount greater than the maximum amount shown in the **policy schedule**.
2. Any losses which are not expressly covered by the terms and conditions of this policy.
3. Any claim made, or any event causing the need for a claim to be made, that occurs before the policy began.
4. Claims that are directly or indirectly caused by, or associated with, **your** failure to comply with applicable animal welfare and animal import or export law.
5. Any claim as a result of any epidemic outbreaks whether vaccinated against or not, or any notifiable disease.
6. Any claim as a result of African **Horse** Sickness, equine flu, tetanus, EHV (Equine Herpes Virus) unless the **horse** is vaccinated against them.
7. Any claim occurring when the **horse** is working, or being used in (or in connection with) any trade, business, or profession, or being used for hire or reward.
8. Business use, hiring or lending out unless specifically endorsed in the **policy schedule**.
9. Claims that are wholly or partially false, exaggerated, or fraudulent.
10. Claims that are directly or indirectly connected with, or arise from, a malicious, wilful, or criminal act or omission by:
 - a. **you** or someone acting on **your** behalf; or
 - b. someone riding, handling, caring for, or interacting with, the **horse** or **saddlery & tack**;
or
 - c. a member of **your family**, or someone who lives with **you** whether as a cohabitee, tenant, or on any other basis; or
 - d. **your** agents, employees, licensees, guests; and/or
 - e. any other person who is in a contractual or business relationship with **you**.
11. Any amount greater than the amount shown in the **policy schedule** for an insured item.
12. The cost of any repair or replacement which improves the **saddlery & tack** beyond the **condition** it was in before it was **accidentally damaged** or stolen.
13. Any reduction in the **market value** of **your saddlery & tack** following any repair whether or not undertaken as a result of any claim under this policy.
14. Loss or damage because **you** are not the rightful (legal) owner.
15. Loss or damage caused by domestic pets.
16. Property more specifically insured elsewhere.
17. The cost of replacing any undamaged items or parts thereof forming part of a set where the remaining items are still useable and the loss or damage occurs within a clearly identifiable area or to a specific part and replacements cannot be matched.
18. Deliberate loss or damage caused by **you** or any user of **your** insured items.
19. Depreciation, deterioration, mechanical or electrical breakdown, breakages, manufacturing defects, wear and tear, damage or loss caused by moth, vermin, rot, mildew, water leakage of any cause, or any gradually operating process or deliberate damage by **you**, or any user of **your** insured items.
20. Faulty workmanship, defective design, or the use of defective materials, repairing, restoring, renovating, cleaning, or dyeing.

21. Loss or damage by fraud, trick, false pretences, use of stolen, forged or invalid cheques/drafts/bank notes and the like or someone pretending to be a buyer or an agent.
22. Any liability that arises only because of an agreement.
23. Any loss, **injury**, damage, **illness**, death, or legal liability caused by or arising from the failure of any computer hardware or software or any other electrical equipment.
24. Any loss, damage, liability, cost, or expense of any kind directly or indirectly caused by, or in any way connected with:-
 - a. war, invasion, and/or the act of terrorists and/or foreign enemies (whether war has been declared or not);
 - b. a coup, military power, civil war, rebellion, revolution, insurrection, riot, civil commotion and/or civil unrest;
 - c. strikes, lockouts, and/or industrial unrest;
 - d. looting in connection with any of a, b and/or c.
25. Any loss, damage, liability, costs, or expense of any kind directly or indirectly caused by, or in any way connected with:
 - a. a nuclear or radioactive **accident**, explosion, escape, waste and/or contamination; and/or
 - b. pressure waves caused by aircraft or other aerial machines or devices of any kind.
26. Any loss, damage, liability, cost, or expense of any kind directly or indirectly caused by, resulting from or in connection with any act of terrorism. For the purposes of this exclusion, 'terrorism' means the use, or threat of use, of biological, chemical and/or nuclear form or contamination by any person(s), whether acting alone or on behalf of or in connection with any organisations(s) or governments(s), committed for political, religious, ideological or similar purposes, including the intention to influence any government(s) or put any section of the public in fear.
27. In no case shall this insurance cover loss, damage, liability or expense directly or indirectly caused by or contributed to by or arising from the use or operation, as a means for inflicting harm, of any computer, computer system, computer software programme, malicious code, computer virus, or process, or any other electronic system.
28. In no case shall this insurance cover loss, damage, liability or expense directly or indirectly caused by or contributed to by or arising from pollution or contamination of water, buildings or structures, land, or the atmosphere.
29. **We** do not cover any loss, **injury**, damage, **illness**, death, or legal liability, directly or indirectly, caused by, happening through, in consequence of or contributed to by:
 - a. an epidemic, a pandemic, influenza, notifiable disease, virus, bacteria, or contagion, or any derivation or variant thereof;
 - b. arising from any fear or threat (whether actual or perceived) of such an epidemic, pandemic, influenza, notifiable disease, virus, bacteria, or contagion;
 - c. any action taking in controlling, preventing, suppressing or in any way relating to any epidemic, pandemic or outbreak of such influenza, notifiable disease, virus, bacteria, or contagion.

If **we** allege that, by reason of this exclusion, any claim is not covered by this insurance the burden of proving the contrary shall be upon **you**.
30. **We** do not cover any loss, **injury**, damage, **illness**, death, or legal liability, directly or indirectly caused by, happening through, in consequence of, or contributed to by an **illness** or disease transmitted from animals to humans.
31. **We** do not cover any loss, **injury**, damage, **illness**, death, or legal liability, directly or indirectly, caused by, happening through, in consequence of or contributed to by an act of the UK, Channel Islands, or Isle of Man government or any member of that government, the UK's armed forces, or any UK, Channel Islands, or Isle of Man regulatory, law enforcement or other authority of any kind, whether that act has the force of law, or is merely part of the formal or informal guidance issued or given by, or made or given by, such persons, forces or authorities as the case may be.

32. Any third-party fees or charges incurred in investigation of, or assessment of, **your** claim including but not limited to, the costs of, and associated with, obtaining a police, or fire report, and/or medical records.

APPENDIX ONE: SECURITY REQUIREMENTS

You must adhere to these **security requirements** otherwise **your** insurance may be invalid and **we** may reject **your** claim.

Significant words and phrases

home	a private house of standard construction built of brick, stone, or concrete with a slate, tiled, or multi-layered roof where you normally live
apartment shared rooms	the self-contained room(s) within a building of standard construction built of brick, stone, or concrete with a slate, tiled, or multi-layered roof where you normally live
locked non-domestic building	a building (or part of a building) not used for domestic purposes

Location

Security Requirement

home apartment shared rooms	<ul style="list-style-type: none"> all external doors must be locked with the keys removed from the locks; and all external windows must be closed and securely fastened, locked, or bolted, except those in occupied bedrooms at night; and security systems must be activated.
locked non-domestic building	<ul style="list-style-type: none"> all external doors must be secured by a 5 lever mortise lock or closed shackle padlock and the windows securely locked and covered by steel bars or grids.
unattended vehicle	<ul style="list-style-type: none"> stored out of sight in an enclosed storage compartment, boot, or luggage space; and all vehicle doors and windows must be closed and securely locked, and all vehicle security systems activated.

NOTE: unattended vehicle cover does not apply when the vehicle is at **your home**. **Your saddlery & tack** must be removed and stored within **your home**.