

Note:

- 1. To be completed by the Policyholder**

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First name

[illegible]

Surname

[illegible][illegible][illegible]

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[illegible]

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Pet's name

Pet's name

Dog

Cat

Date of birth

Desexed

Gender

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D	D	M	M	Y	Y
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☐ Yes ☐

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Please ask your vet to complete in order to ensure efficient processing of your claim.

[illegible]

D	D	M	M	Y	Y
D	D	M	M	Y	Y
D	D	M	M	Y	Y

\$	
\$	
\$	

When was the pet registered at your practice?

Date of last vaccination/booster

D	D	M	M	Y	Y
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D	D	M	M	Y	Y
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Yes

No

[illegible]

3. Declaration

I/We certify that the information given in this form is truthful, accurate and complete. No information likely to affect processing or assessment of the claim has been withheld. I/We understand that deliberate misrepresentation of the animal's condition or the omission of any material facts may result in the denial of the claim and/or cancellation of the policy. I/We confirm that the account(s) submitted with this claim have been paid in full and I/We understand that the information provided will be assessed in accordance with the cover selected and benefits payable by the policy. I/We authorise my/our veterinary surgeon who has treated my/our pet to provide to the insurer any details they may require. Please note that issuance or completion of this form does not acknowledge liability or guarantee payment of the claim.

I/We consent to Pet Insurance Pty Ltd ABN 38 607 160 930 (PIPL), PetSure (Australia) Pty Ltd ABN 95 075 949 923 (PetSure), and/or The Hollard Insurance Company Pty Ltd ABN 78 090 584 473 (Hollard) collecting, storing, using and disclosing personal information (including sensitive information) as set out in the Privacy Notice contained in this form. If I/We have provided or will provide information to PIPL, PetSure or Hollard about any other individuals, I/We confirm that I/We are authorised to disclose their personal information to PIPL, PetSure or Hollard and also to give this consent on both my and their behalf.

Signature of Policyholder

Date

D

D

M

M

Y

Y

Signature of veterinarian

Date

D

D

M

M

Y

Y

Name of attending veterinarian and practice

Veterinarian registration no.

Registration state

Make a claim in three easy steps

- Step 1

Fill in your and your pet's information and sign the claim form.
- Step 2

Take the form to your vet, and ask your vet to fully complete section 2 and sign the form in section 3.
- Step 3

Attach the original detailed itemised invoices and payment receipts to the completed claim form. Please do not staple documents. Ensure your vet includes their practice details on the original invoice.

Then mail to the address below:
Petinsurance.com.au – Claims Department,
Locked Bag 9021, Castle Hill, NSW 1765

How your claim is assessed
Once all necessary documentation is received, your claim will be processed. In many cases your claim can be processed directly without a full veterinary history being required. However, in some cases, additional veterinary records may be requested to assist in understanding an aspect of your claim to ensure it is processed correctly and fairly.

How your claim will be paid
If you have elected to pay your premiums by direct debit your benefits will be paid directly into your nominated bank account. If you have elected to pay your premiums by credit card you will need to nominate a bank account to receive claim benefits. Following the payment of your claim you will also receive a statement confirming payment.

Claim checklist

- ☐ You have attached any relevant vet consultation notes.
- ☐ You have completed the claim form
- ☐ You have attached the original itemised invoices and receipts
- ☐ You and your vet have signed this form
- ☐ You have attached an adoption certificate if your pet is an adopted or rescued pet (if not previously supplied to us)

Need more claim forms?

You can access copies of this form online at petinsurance.com.au or by calling 1300 855 663.

If you have any questions about your claim, please call 1300 855 663, 8.00am – 8.00pm (AET) Monday to Friday.

Disclaimer: It is a criminal act to make a false or fraudulent claim under an insurance policy or to assist in the preparation or presentation of a false or fraudulent claim under a policy. Violators of this provision may be subject to criminal prosecution.

Neither Petinsurance.com.au, nor any of its related entities, directors or employees guarantees the assessment or payment of claims under any policy issued and underwritten by Hollard or PetSure.



Please mail completed claim form to:
Petinsurance.com.au – Claims Department, Locked Bag 9021, Castle Hill NSW 1765

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