

Veterinary fee claim form

Claims must be submitted in writing to the administrator of Bupa Pet Insurance, at the address set out in this form together with the original itemised invoice and receipts for payment within 90 days of the date veterinary expenses are incurred, unless otherwise stated in the policy document.

Note: If this is your first claim please attach a complete veterinary history (medical records) from all current and previous veterinary clinics. If you have previously provided this information, or if it is a routine care claim, you do not need to provide it. If you do not provide this information as requested, there may be a delay in assessing your claim.

Faxed claims will not be accepted. Please use a black pen and print in CAPITALS. If you have any questions about your claim please call **134 135** between 8.00am - 8.00pm (AEST) Monday to Friday.

1. Policy owner/pet details

Bupa Pet Insurance policy number

Policy owner details

Title First Name Surname

Address

Suburb State Postcode

Phone Email

Pet details

Pet's name Desexed Yes No Dog Cat Date of birth

Colour Breed

If you are registered for GST and are entitled to a GST Input Tax Credit (ITC) on your premium, what is the ITC percentage? %

ABN By leaving these details blank, the insured confirms that no entitlement to GST ITC exists.

2. Record of veterinary services

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

Type and cause of injury or condition/diagnosis	Treatment dates	Dates of first clinical signs (include dates of previous related or similar conditions)	Total charges
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please attach radiology and/or pathology reports where applicable

When was this pet registered at your practice? Date of last vaccination/booster:

Type of vaccination:

Have you supplied a full veterinary history if this is your client's first Accident or Illness claim? Yes No

Notes

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 Administrator will assess the claim 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.

Signature of pet owner Date Signature of veterinarian Date

Name of attending veterinarian and practice (please print) Veterinarian registration no. Registration state

Pet Insurance

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:

**Bupa Pet Insurance - Claims Department,
Locked Bag 9021, Castle Hill, NSW 1765**

How your claim is assessed

Once the necessary documentation is received, your claim will be processed without delay and payment will be made to the policy holder by cheque or directly into a nominated account.

In many cases your claim can be processed directly without veterinary records being required. However, in some cases veterinary records may be requested to assist in understanding some 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 receive a cheque as payment of your benefits. Following the payment of your claim you will also receive a statement confirming payment.

Claim checklist

Before sending in your claim ensure:

- You have attached a full veterinary history (medical records from previous veterinary visits) if this is your first claim (no history is required for Routine Care claims)
- You have completed the claim form
- You have attached the original itemised invoices and receipts
- You and your vet have signed this form

Please note: All claims should be submitted and received within 90 days of treatment.

Need more claim forms?

You can access copies of this form online at bupa.com.au/pet-insurance or by calling **134 135**.

If you have any questions about your claim, please call **134 135**, 8.00am – 8.00pm (AEST) 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.

Bupa Pet Insurance is:

- underwritten by The Hollard Insurance Company Pty Ltd. ABN 78 090 584 473 AFSL 241436 ("Hollard");
- administered by PetSure (Australia) Pty Ltd ABN 95 075 949 923 AFSL 420183, and
- promoted by Bupa Australia Pty Ltd ABN 81 000 057 590 Authorised Representative No 354269, as an authorised representative of PetSure.

Neither Bupa Australia Pty Ltd, nor any of its related entities, directors or employees guarantees the assessment or payment of claims under any policy issued and underwritten by Hollard.

Please mail completed claim form to:

Bupa Pet Insurance - Claims Department,
Locked Bag 9021, Castle Hill, NSW 1765