

Moo Pet Insurance Claim Form

To be completed by the Policyholder

Please send the completed Claim Form and all supporting documents to **Claims.Moopet@kainosint.com**

Policyholder first name:

Last name:

Home address:

Email:

Phone:

Mobile:

Policy number:

About your pet

Pet's name:

Is your pet a:

Dog

Cat

Is your pet:

Male

Female

Breed:

Breed Type:

Date of birth:

Age:

How long you've owned the pet:

Microchip number:

Municipality tag number (Dubai only):

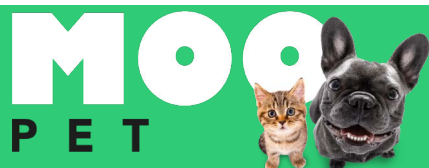
Please note, this is separate to your pet's microchip number and can be found on your pet's collar tag in the format C12345-2022 or D12345-2022

Date Municipality tag issued:

Last health check:



Moo Pet Insurance is underwritten by Alliance Insurance PSC, with claims administration services provided by Kainos International Limited.



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Please send the completed Claim Form and all supporting documents to **Claims.Moopet@kainosint.com**

Claim information

Name of illness/injury as advised by Vet:

Date you first noticed your pet was unwell:

Is this a continuation of an existing claim?: Yes No

Has your pet ever suffered from a similar illness or injury before?: Yes No

If yes, when?:

Payment information

Cost of treatment:

Who you would like us to pay?: Policyholder Veterinarian

BIC:

IBAN:

Please note, we can only make payments to the named Policyholder or Veterinary practice, and only to UAE bank accounts with the account currency in AED

Declaration

By ticking this box I confirm that I authorise Moo Pet to provide the Veterinary practice with information about my policy in respect of this claim, and the Veterinary practice mentioned above to provide Moo Pet with all information relating to my pet. I also confirm I have checked the information given on this form and that it is correct.

Agree:

Date:

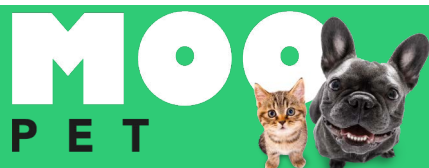
By ticking this box I confirm that I understand that any claim amount will be reduced by the deductible. I will pay 20% of the claim, subject to a minimum of AED 360. I understand that if Moo Pet cannot pay some or all of the claim that it is my responsibility to pay the Vet.

Agree:

Date:



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Moo Pet Insurance Claim Form

Have you included everything we need to assess your claim?

Without the following we will be unable to assess your claim:

Completed Claim Form

Clinical history from any previous Veterinary practices

Vaccination card and/or Pet Passport

Clear photograph of pet

Please send your completed Claim Form and all supporting documents to
Claims.Moopet@kainosint.com via the email address registered to your policy.

Please note that each claim you make is subject to your policy deductible. You will pay 20% of the claim, subject to a minimum of AED 360 per condition, per claim submission.

Please see guidance notes below for help with supporting documentation.

Supporting documentation guidance notes

In order for us to process a claim, there are several things we require from the Policyholder.

Claim Form

Pages 1, 2 and 3 must be completed by the Policyholder and sent to us via the email address registered to the policy.

Insured pet's clinical history notes from previous practices

If your pet has been seen by any other practices (including for routine vaccinations and health-checks), we will require full copies of the pet's previous clinical records to be emailed to us by the Policyholder. It is your responsibility to obtain all previous medical history from previous veterinary practices.

Photo of your pet

A current, clear photo of your pet should be sent to us by the Policyholder from the email address registered to the policy.

Municipality Tag number (Dubai only)

This can be found on the collar tag issued by the Dubai municipality when the pet was registered with them. It is a requirement of the policy that all Dubai-based pets are Municipality registered in Dubai in accordance with Dubai law. The Municipality Tag number can be found on the collar tag issued to you when you registered your pet with the Dubai Municipality.

To be completed by the treating Vet

Please email the full clinical history, completed claim form, relevant invoices and vet's license to claims.moopet@kainosint.com

Name of Veterinary Practice:

Name of treating Vet:

Email address:

Vet License Number:

License Verification code:

Pet information

Date first registered to practice:

Has this pet been referred to you?: Yes No

If yes, by whom:

Date of last health-check:

Date of last annual vaccination:

Claim information

Name of illness/injury:

Treatment dates:

When did this illness/injury first begin?:

Has the pet been seen for this condition or a related condition before?: Yes No

If yes, when?:

Did the condition result in death/euthanasia?: Yes No

If yes, date of death:

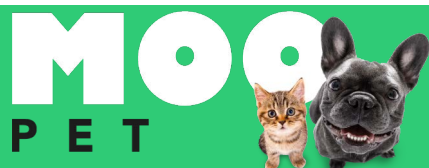
If the pet was put to sleep, did you recommend this?: Yes No

Total claim amount:**Declaration:**

This section has been completed by the treating Vet or authorised representative:

I have attached the full medical history (from the date first registered to my practice) for the pet I have treated:

I have attached invoices for treatments related to the claim:



Moo Pet Insurance Claim Form

Moo Pet for Vets

Our policies exist to help protect pet owners against costs when a pet unexpectedly becomes unwell or suffers an injury. Our policies are not health care policies - they do not cover routine or preventative treatments, such as vaccinations, health checks, or parasite issues (including Giardia). Like all pet insurance policies, our policies do not cover any conditions that first happened or showed clinical signs or symptoms *before* the policy was taken out, or during the first 30 days of the policy.

In order for us to process a claim, there are several things we require, as set out below.

From the treating Vet:

These can be emailed directly to claims.moopet@kainosint.com

Claim Form

Page 4 **must** be completed by the treating Vet. Page 4 also contains a checklist to ensure all necessary paperwork has been attached by the Vet.

This is required to confirm the clinical details and cost of the claim, and so that the claim can be dealt with quickly and efficiently without repeatedly contacting the veterinary practice.

Full medical history from the treating practice

The treating Vet should include a printout of the pet's full medical history at the practice. This should be taken from the system you use to record clinical notes, and should include details of all examinations, treatment administered, procedures undertaken, medication prescribed and/or supplied, the results of any diagnostic or laboratory tests and advice given to the client (whether over the telephone or in person) from the date the pet was first registered to your practice to the present. It is important to note that we cannot accept individual SOAP notes or medical reports alone, as our insurers require the pet's full medical history prior to any claims being agreed.

Full clinical history enables us to build up a comprehensive understanding of the pet's general health, any relevant medical conditions, and be sure that the pet is being looked after.

Invoices

The invoices for all claimed treatment/medication costs as presented to the customer.

This enables us to confirm to the insurers what is being paid for.

Copy of treating Veterinarian's License OR License number AND License verification code

We use this to verify that the treating Vet is licensed by the United Arab Emirates. If you prefer to supply the license number and verification code (this is the number directly below the license number on the certificate) rather than a copy of the certificate itself, we can then check the license via the MOCCAE website.

It is a requirement of our insurer that we only deal with claims for treatment/medication provided by registered Veterinarians.