

Total Paw Protection Cover

Combined Financial Services Guide
and Product Disclosure Statement



**everyday
pet insurance**
from Woolworths

Everyday Pet Insurance policies are arranged, distributed and promoted by Woolworths Group Limited (Woolworths) ABN 88 000 014 675 of 1 Woolworths Way, Bella Vista, NSW 2153.

Everyday Pet Insurance policies are administered through PetSure (Australia) Pty Ltd (**PetSure**) ABN 95 075 949 923, AFSL 420183 of Level 1, 465 Victoria Avenue, Chatswood, NSW 2067

Renewals of Everyday Pet Insurance policies first issued before 17 July 2023 are issued by The Hollard Insurance Company Pty Ltd (**Hollard**) ABN 78 090 584 473, AFSL 241436 of Level 5, 100 Mount Street, North Sydney, NSW 2060.

Woolworths is an Authorised Representative of Hollard (AR No. 245476)

All other Everyday Pet Insurance policies (including policies issued as replacement policies and their subsequent renewals) are issued by PetSure (Australia) Pty Ltd (**PetSure**) ABN 95 075 949 923, AFSL 420183 of Level 1, 465 Victoria Avenue, Chatswood, NSW 2067.

Woolworths is an Authorised Representative of PetSure (AR No. 245476)

A *replacement policy* is an Everyday Pet Insurance policy that is issued in accordance with the *replacement policy* process (see [Automatic renewal or replacement of your policy](#) section) when the product is no longer issued by Hollard.

This Combined Financial Services Guide and Product Disclosure Statement was prepared on 29 January 2026.

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Introducing your pet insurance

Everyday Pet Insurance Total Paw Protection Cover offers cover for *accidental injuries, illnesses and emergency pet boarding* with optional *Booster Care* benefits for *specialised therapies and specified dental conditions* and optional non-insurance benefits for *Routine Care*.

Your certificate of *insurance*, provided when your policy is issued, outlines your plan details including the plan name, your *benefit percentage, benefit limit* and *annual excess* (if any). It also lists the details of any optional benefits you have selected.

Your certificate of *insurance* is reissued when you renew your policy each year, if you change your details (for example, your address) and if you change your cover.

Whether you've already bought this policy or you're still deciding whether you'd like to, please be sure to read through this booklet.

We've kept it as simple as we can, but there are things we need to tell you about that are a bit more detailed. This is because your policy is a legal contract between us and you.

Words in *italics* have a special meaning and these can be found at the end of this booklet under [Definitions of important terms](#).

When reading this booklet, unless specified otherwise, references to:

- ‘**we**’, ‘**us**’ or ‘**our**’ means Hollard, PetSure, or Woolworths for policies first issued before 17 July 2023; and
- ‘**we**’, ‘**us**’ or ‘**our**’ means PetSure, or Woolworths for all other policies, including *replacement policies* issued by PetSure.
- ‘**you**’ or ‘**your**’ means the applicant for an Everyday Pet Insurance policy and if a policy is issued, the named insured on the certificate of *insurance*.
- any legislation contained in the policy includes any amendment, replacement, re-enactment or successor legislation.
- singular includes the plural and vice versa.
- dollar amounts are to Australian dollars.
- ‘times’ are to the time and business days in Sydney, NSW, Australia.

How this booklet works

This booklet contains:

- A Product Disclosure Statement, or PDS
- A Financial Services Guide, or FSG
- Definitions of important terms

As well as reading through this information, you should also check your certificate of *insurance*, along with any other correspondence from us.

Note: From time to time, we may also update this booklet with a supplementary version that contains recent changes or advise you of changes on our website. This is outlined in the section about how we make [Updates to the PDS](#).

What to do first

1. Read through this booklet to make sure you understand everything.

We've included quick overviews on how to make claims, what your policy covers (and doesn't), how to pay your premiums and change your cover. More detailed information is provided later in the booklet, and it's important you read these sections to fully understand your policy terms and what you need to know.

Any information contained in this booklet is general information only and does not take into account your individual objectives, financial situation or needs. Before acting on this general information or buying this product, you should carefully read this booklet and consider the appropriateness of the general information having regard to your individual objectives, financial situation and needs.

2. Check that all the information you've given us is correct.

Check the details in your certificate of insurance and contact the Everyday Pet Insurance customer service team straight away if any of these details have changed or need correcting (like if you've moved house). Our [Contact details](#) are on the last page of this booklet. It's important to ensure that you haven't misrepresented anything, even if by mistake. There's a section in the PDS about [Your duty to take reasonable care not to make a misrepresentation](#).

3. Keep your insurance documents together and in a safe place.

To make it easy for you to access your policy documents when you need them, file them all together, where you keep your other important paperwork or electronic documents.

Insurance cover overview

The basics

The only pets we insure are dogs and cats. Your pet must be younger than 9 years when you first apply for a new Everyday Pet Insurance Total Paw Protection policy. Your pet also needs to live with you and be under your regular care and supervision at the address you have provided to us.

Your policy will continue for 12 months from its *commencement date* unless it is cancelled by you or by us.

Your policy is made up of the *certificate of insurance*, PDS, FSG and any supplementary disclosure documentation issued by us from time to time.

Summary of your benefits

Your pet insurance policy provides financial assistance to you for certain costs and expenses that you incur in relation to your pet during your *policy period*, such as:

- eligible vet expenses for the *treatment* of covered *conditions*; and
- other benefits listed on your *certificate of insurance*, for example, optional *Routine Care* (non-insurance benefit).

Noting that:

- these *conditions* must occur after the *commencement date* of the *first policy period* and after any applicable *waiting period*;
- the *treatment* and other benefits need to be covered by your specific level of *cover* and must occur during the *policy period*;
- the amount we cover is referred to as your *benefit percentage*; and
- optional benefits, if chosen, have dedicated limits that are in addition to the *benefit limit*, for example, the *Booster Care limit*.

Finally, you'll be responsible for the *annual excess* (if any), as shown on your *certificate of insurance*.

This is a summary only. You can find out more about the details and terms of your policy and your cover throughout this booklet and more specifically in the following sections:

- [Your cover](#)
- [Optional benefits](#)

You should also know that there are exclusions within your policy, where we don't provide cover or pay benefits. For example, *pre-existing conditions*, breeding related expenses and pet grooming. These, along with all other exclusions, are outlined in section 1 [Your cover](#), section 2 [Optional benefits](#) and in the [General exclusions](#) section.

Waiting periods

When you take out cover for the first time, there are *waiting periods* for different *conditions* and benefits. *Waiting periods* also apply after a break or lapse in your cover. If you change the Everyday Pet Insurance product and/or level of cover you have for your pet, *waiting periods* will only apply to any *conditions* or benefits covered by the new product and/or level of cover that weren't covered under your previous product or level of cover.

If your pet shows signs or symptoms during the *waiting period* for a *condition* that may or may not need *treatment*, the following will happen:

- your pet won't be covered for any *vet expenses* incurred in relation to the *condition*; and
- the *condition* may be excluded from your cover in the future as a *pre-existing condition*.

You can read more about this in the section about [Waiting periods](#).

Premiums overview

This is a summary only, not the full story. For the details, read the [Paying your premium](#) section.

Your premium is the amount of money you agree to pay us for your policy. You can pay the premium we calculate as a single annual payment or by regular instalments, e.g. fortnightly or monthly.

Premiums must be paid on or before the due date. If you have a direct debit arrangement for regular payments, you'll need to keep enough money in your account to avoid any dishonour fees from your bank.

Please also read the [Renewals, cancellations & changes](#) section.

Claims overview

Making a claim is simple with these 4 steps. To read the full details, go to the section about [Making a claim](#).

Via the secure Pet Portal
or your vet

Via your GapOnly®
enabled vet

STEP 1

Get your pet the *treatment(s)* it needs by visiting any registered vet in Australia.

STEP 2

Pay for the *treatment(s)* and keep the itemised invoice(s) and veterinary notes (if provided to you) to use when you make your claim.

If your vet is GapOnly® enabled, let them know you'd like to submit a GapOnly® claim for your pet's treatment.

STEP 3

Many vets are happy to lodge the claim digitally on your behalf, provided you authorise them and they are able to do so. Otherwise, simply sign up and log in to the secure [Pet Portal](#) to submit and track your claim.

The vet lodges the GapOnly® claim, and it's normally assessed by us within 10 minutes, where available.

STEP 4

Once we have all the required information, we'll assess your claim and notify you of the outcome. If we need more information before we can finish your assessment, you'll hear from us.

Once the claim has been processed and if approved, you simply pay the gap (the difference between the vet's invoice and the calculated benefit) and go. You can find out more about GapOnly® here: gaponly.com.au

Note: We'll notify you of the basis of our final decision, so you know how we've assessed your claim.

Product Disclosure Statement

Please read this PDS carefully to understand your cover as it contains important information such as:

- significant features, benefits and limitations of your Everyday Pet Insurance policy;
- our internal and external procedures for resolving disputes; and
- your cooling off period and rights when you are issued an Everyday Pet Insurance policy.

This PDS was prepared by both insurers, PetSure and Hollard who are jointly responsible for the entire PDS. Each insurer is also wholly responsible for their own product in respect of the described benefits, features, options, limitations, fees and costs of such products which they issue.

Woolworths has given its consent to all statements by or about them in the form and context in which they are included and have not withdrawn that consent as at the date of the PDS. These statements appear throughout the PDS.

Your insurer will be different, depending on when your policy was first issued and whether or not it was issued as a *replacement policy*.

Renewals of policies first issued before 17 July 2023

Hollard is the issuer and the insurer of each Everyday Pet Insurance policy. PetSure has been given a binding authority by Hollard which authorises it to enter into, vary and cancel policies on behalf of Hollard as if it were Hollard, as well as manage, administer and settle claims subject to the limits of authority agreed with Hollard. Neither Hollard nor PetSure act for you. Woolworths is authorised to arrange, distribute and promote Everyday Pet Insurance policies, but is not involved in the assessment or payment of claims. Woolworths does not act for you.

All other policies including policies issued as replacement policies and their subsequent renewals

PetSure is the issuer and the insurer of each Everyday Pet Insurance policy. PetSure does not act for you. Woolworths is authorised to arrange, distribute and promote Everyday Pet Insurance policies, but is not involved in the assessment or payment of claims. Woolworths does not act for you.

1. Your cover

This section is about the cover for your pet that is included in your policy. Your cover is made up of the following:

- *Accidental injury and illness cover*
- *Emergency pet boarding cover*

Your certificate of insurance will list your selected *benefit percentage*, *benefit limit* and *annual excess* (if any).

This section does not include details of the optional benefits you may choose to also have cover for. Please see section 2 [Optional benefits](#) for this information.

Accidental injury and illness cover

If your pet suffers an *accidental injury* or *illness* after the commencement date of the *first policy period* and after any applicable *waiting period*, we'll provide cover for eligible *vet expenses* incurred by you during the *policy period* in relation to the *accidental injury* or *illness* subject to:

- the *benefit percentage* and *benefit limit* stated on your certificate of insurance;
- the *annual excess* amount (if any) stated on your certificate of insurance; and
- the terms and conditions in this policy, for example *waiting periods* and *exclusions*.

Accidental injuries

An *accidental injury* refers to physical harm to your pet resulting from:

- an unexpected and unintended external event that occurs suddenly at a specific time and place; or
- poisoning, intoxication, a venomous bite or sting or thermal- related conditions such as heatstroke or frostbite.

An *accidental injury* excludes any harm resulting from a *behavioural condition, specified dental condition* or any sickness or disease.

Subject to policy terms and conditions, this cover extends to a wide range of *accidental injuries* which may include:

- ✓ motor vehicle incidents;
- ✓ injuries caused by another animal including rough play;
- ✓ falls from heights;
- ✓ cuts, lacerations and stick injuries;
- ✓ grass seed embedment or entrapment;
- ✓ traumatically fractured teeth;
- ✓ near drowning;
- ✓ burns, heatstroke or frostbite;
- ✓ exposure to venomous bites such as snake bite and tick paralysis;
- ✓ reactions to bites or stings from insects, or other critters (excluding infestations such as mites or fleas);
- ✓ toxicity from ingesting harmful substances like chocolate, rat bait or grapes (excluding any illicit drugs); and
- ✓ ingestion of foreign objects (excluding instances of gastroenteritis caused by ingestion of inappropriate food items or common environmental substances such as garbage).

✗ We don't provide cover for anything listed in the [General exclusions](#) section.

Waiting periods

- 2 days for *accidental injuries*
- 6 months for *cruciate ligament conditions*

Note: If you have the *Booster Care* optional benefit, refer to section 2 for details of your cover for *specified dental conditions* and *specialised therapies* (including *behavioural conditions*).

Illnesses

An *illness* is a sickness or disease that is not an *accidental injury*, *specified dental condition* or *behavioural condition*.

Subject to policy terms and conditions, this cover extends to a wide range of *illnesses* which may include:

- ✓ skin allergies;
- ✓ ear infections;
- ✓ gastrointestinal conditions such as gastroenteritis, intestinal parasites or pancreatitis;
- ✓ masses, lumps and cancer;
- ✓ eye conditions such as conjunctivitis, entropion or cataracts;
- ✓ musculoskeletal conditions such as arthritis, hip dysplasia, elbow dysplasia, intervertebral disc disease (IVDD) or patella luxation (dislocating kneecap) no matter how the *condition* arises;
- ✓ infectious diseases such as leptospirosis, heartworm, cat flu or kennel cough;
- ✓ urinary diseases such as urinary infection, blood in urine or blocked bladder;
- ✓ endocrine diseases such as diabetes, Cushing's or hyperthyroidism;
- ✓ emergency situations such as gastric dilatation and volvulus (GDV), seizures and anaphylactic reactions;
- ✓ urogenital diseases such as pyometra, hooded vulva or enlarged prostate;
- ✓ kidney diseases such as chronic kidney disease, acute kidney injury or kidney stones; and
- ✓ respiratory diseases such as asthma, bronchitis or pneumonia.

✗ We don't provide cover for anything listed in the [General exclusions](#) section.

Waiting period

- 30 days for *illnesses*

Note: If you have the *Booster Care* optional benefit, refer to section 2 for details of your cover for *specified dental conditions* and *specialised therapies* (including *behavioural conditions*).

Emergency pet boarding

What we cover

If you require hospitalisation or emergency accommodation at some time during your *policy period*, there are circumstances where we'll provide cover for your pet's boarding costs incurred by you at a licensed kennel or cattery.

It is important to note that you'll need to be the sole carer of your pet, and it's not reasonable for someone else living with you to look after your pet.

We'll then cover the *benefit percentage* for the reasonable and customary emergency pet boarding costs incurred for your pet, up to the *benefit limit* shown on your *certificate of insurance*, subject to the *annual excess* (if any) for a maximum of 30 days per *policy period*. These 30 days do not need to be consecutive and can be used as needed during the *policy period* in the following circumstances:

- ✓ you require emergency accommodation due to family violence; and/or
- ✓ you are unexpectedly hospitalised for two or more consecutive days during the *policy period*, and it doesn't relate to cosmetic or other kinds of elective surgery, or for pregnancy (unless it's due to an unexpected complication).

You must provide us with a paid tax invoice that includes:

- the boarding facility's business name, address, contact number and Australian Business Number (ABN) details;
- your name, your pet's name and your address; and
- boarding dates, daily and total charges and the service(s) provided.

What we don't cover

- ✗ any boarding costs incurred as a result of any event or circumstance that occurred or was known to you before the commencement date of your *first policy period*;
- ✗ any boarding costs in relation to any other person living with you needing to be hospitalised for any reason; or
- ✗ any additional add on costs such as other services provided by the boarding facility including but not limited to administering medication, pet pick up and drop off fees, bathing/grooming or daily walking.

Waiting period

- 0 day *waiting period*

2. Optional benefits

This section is about the optional benefits you may choose to have cover for. Your *certificate of insurance* will list which of these optional benefits (if any) you have selected together with their applicable limits. These benefits are subject to your policy terms and conditions, including policy exclusions.

The limits applicable to these benefits are in addition to your *benefit limit*.

Routine Care (non-insurance benefit)

Optional benefit - applies if you select it

If you have chosen *Routine Care*, this optional non-insurance benefit contributes towards the cost(s) you incur during your *policy period*, for any of the specified *Routine Care* items shown on your *certificate of insurance*, up to the *Routine Care limit* which is additional to the *benefit limit*.

Your *certificate of insurance* will show if you have chosen the *Routine Care* benefit option, and will also show:

- exactly which *Routine Care* items you are eligible to receive benefits towards; and
- your *Routine Care limit*.

The *benefit percentage* and *annual excess* do not apply to *Routine Care* items.

Waiting period

- 0 day *waiting period*

Booster Care

Optional benefit - applies if you select it

If you have chosen the Booster Care optional benefit this will be shown on your certificate of insurance together with the *Booster Care limit* which is additional to your policy's benefit limit.

Booster Care provides cover, as outlined below, for specified dental conditions and specialised therapies up to the *Booster Care limit*. The *Booster Care limit* is the maximum amount payable during the *policy period* across both specified dental conditions and specialised therapies combined.

Booster Care - specified dental conditions

What we cover

If you have chosen the Booster Care optional benefit and your pet suffers a *specified dental condition* after the *commencement date* of the *first policy period* and after any applicable *waiting period*, we'll provide cover for eligible vet expenses incurred by you during the *policy period* in relation to that *specified dental condition* subject to:

- the benefit percentage, *Booster Care limit* (which is additional to the *benefit limit*) and *annual excess* (if any), stated on your certificate of insurance; and
- the terms and conditions in this policy, for example *waiting periods* and *exclusions*.

Cover under this section of the policy is restricted to eligible vet expenses incurred for scaling, polishing, dental x-rays and tooth removal for the following *specified dental conditions* only:

- ✓ gingivitis;
- ✓ abscesses;
- ✓ odontoclastic resorptive lesions;
- ✓ dental disease arising from infection;
- ✓ retained deciduous teeth;
- ✓ cavities; or
- ✓ fractured teeth due to dental disease.

What we don't cover

- ✗ anything which is not listed as a *specified dental condition*;
- ✗ anything which is not scaling, polishing, dental x-rays or tooth removal for a *specified dental condition*; or
- ✗ anything listed in the [General exclusions](#) section.

Waiting period

- 6 month *waiting period*

Booster Care - specialised therapies

What we cover

If you have chosen the Booster Care optional benefit and your pet suffers a covered condition after the commencement date of the *first policy period* and after any applicable waiting period, we'll provide cover for eligible vet expenses incurred by you during the *policy period*, for specialised therapy items subject to:

- the benefit percentage, *Booster Care limit* (which is additional to the *benefit limit*) and annual excess (if any), stated on your certificate of insurance; and
- the terms and conditions in this policy, for example *waiting periods* and exclusions.

Cover under this section includes procedures, tests and legally prescribed medicine for the *specialised therapy* items below, when it is deemed necessary by your vet to treat a covered condition:

- ✓ physiotherapy or physical therapy carried out by a qualified animal physiotherapist or vet;
- ✓ chiropractic manipulation carried out by a staff member of a veterinary practice, provided the staff member is a qualified animal chiropractor;
- ✓ acupuncture carried out by a vet;
- ✓ hydrotherapy carried out by a staff member of a veterinary practice in a pool or on a water treadmill owned by the veterinary practice;
- ✓ prescribed medication and diagnostic tests for *behavioural conditions* diagnosed by your vet or a *veterinary behavioural specialist*; or
- ✓ consultations with a *veterinary behavioural specialist* for behavioural conditions.

What we don't cover

- ✗ the cost of any specialised therapy used to prevent any condition;
- ✗ specialised therapy for anything that is not a covered condition;
- ✗ anything that is not listed as a specialised therapy item; or
- ✗ anything listed in the [General exclusions](#) section.

Waiting periods

The waiting period that applies for specialised therapy items is dependent on the waiting period for the covered condition:

- 2 days for *accidental injuries*
- 30 days for *illnesses*
- 30 days for *behavioural conditions*
- 6 months for *cruciate ligament conditions*

3. Waiting periods

When you take out cover with us for the first time, there are *waiting periods* for different *conditions* and *benefits*. *Waiting periods* also apply after a break or lapse in cover. If you change the Everyday Pet Insurance product and/or level of cover you have for your pet, with a different product and/or level of cover, *waiting periods* will only apply to any *conditions* or *benefits* covered by the new product and/or level of cover that weren't covered under your previous product or level of cover.

If a *condition* exists or occurs that may or may not need *treatment* during any applicable *waiting period*, you will not be covered for the *vet expenses* incurred in relation to the *condition*, irrespective of whether it's a *pre-existing condition*, a *previous condition*, a *new condition* or a *temporary condition*.

Also, the *condition* may be excluded from your cover in the future, as a *pre-existing condition*.

About waiting periods

The different *waiting periods* for covered *conditions* and *items* are set out below. The *waiting period* starts from 11:59PM on the *commencement date* of the *first policy period* in which you obtained cover for the applicable *condition* or *item* as described below.

Item	Waiting period
Accidental injuries	2 days
Illnesses	30 days
Cruciate ligament conditions (and conditions arising from this, irrespective of their cause or origin)	6 months
Specified dental conditions (Booster Care)	6 months
Behavioural conditions (Booster Care)	30 days

Note: The *waiting period* that applies for *specialised therapy items* is dependent on the *waiting period* for the *covered condition*.

Cruciate ligament condition waiting period

We will agree to reduce the *cruciate ligament condition waiting period* to align with the *accidental injury waiting period* if:

- your vet sends us a completed and signed [Cruciate Ligament Exam Form](#) within 14 calendar days of the cruciate examination date, certifying that your pet was examined by your vet at your expense on or after the *commencement date of the first policy period*; and
- the evidence from your vet meets our assessment criteria as set out in the above form and we confirm this in writing to you.

You can find the Cruciate Ligament Exam Form at: insurance.everyday.com.au/pet-insurance/useful-documents or contact us for assistance.

Note: Submitting the Cruciate Ligament Exam Form does not automatically reduce the *waiting period*.

4. General exclusions

This part of the booklet details what we don't cover or pay benefits for under your Everyday Pet Insurance policy, plus a few things that we only cover in specific circumstances.

These general exclusions are in addition to the items listed in the [Your cover](#) and [Optional benefits](#) sections.

Pre-existing conditions

We do not provide cover or pay benefits for *pre-existing conditions*, unless they meet the requirements of a *temporary condition*, as outlined below. See [Pre-existing conditions which are temporary conditions](#).

A *pre-existing condition* is a *condition* that first existed or occurred:

- prior to the commencement date of your *first policy period*; or
- within any applicable *waiting period*;

AND

- is a *condition* that you were aware of, or a reasonable person in your circumstances would have been aware of, irrespective of whether the underlying or causative *condition* has been diagnosed.

A *pre-existing condition* also includes a *related condition* or *bilateral condition* of a *pre-existing condition*. We suggest you read more about this, including examples, in the [Definitions of important terms](#) part of this booklet.

Note: *Pre-existing conditions which are temporary conditions* are treated differently.

Pre-existing conditions which are temporary conditions

If, after any applicable *waiting period*, your pet has a *pre-existing condition* that is a *temporary condition* which hasn't existed, occurred or shown noticeable signs, symptoms or an abnormality in the 18-month period immediately prior to your claim *treatment date*, it won't be excluded from cover as a *pre-existing condition*.

Hereditary conditions and congenital conditions

Hereditary conditions and congenital conditions won't be considered a *pre-existing condition* if they have not shown noticeable signs, symptoms or an abnormality at any time before the commencement date of the *first policy period* or during any applicable *waiting period*.

Chronic conditions

If your pet has a *chronic condition* that existed or occurred before the commencement date of the *first policy period* or during any applicable *waiting period*, and otherwise falls within the definition of *pre-existing condition*, that condition will always be excluded from your policy and will never be considered a *temporary condition*.

Pre-existing condition review

If at any time you'd like us to check whether a *temporary condition(s)* is excluded from cover as a *pre-existing condition*, based on the terms of the Pre-existing conditions which are temporary conditions section, you can apply to us to check this, using the pre-existing condition review form, which is available here: insurance.everyday.com.au/pet-insurance/useful-documents or contact us for assistance.

Your vet will need to certify and provide veterinary records verifying that the *condition* is a *temporary condition* and hasn't existed, occurred or shown noticeable signs, symptoms or an abnormality for a period of 18 months. We'll let you know in writing whether or not the exclusion still applies.

Specific treatments and conditions

Unless the relevant item appears on your *certificate of insurance*, we don't provide cover or pay benefits for the following even if they are in relation to a *condition*:

- behavioural conditions such as anxiety disorders, phobias or chemical imbalances;

Note: Behavioural conditions diagnosed by your vet or a veterinary behavioural specialist may be eligible for cover under *Booster Care*, if you have this. See the Optional benefits section for more information;

- medicated baths and shampoos, unless your vet says they are medically necessary to treat a *condition* covered by your policy;
- accessories, including but not limited to pill poppers, cage hire, crates, bedding and collars;
- medication not approved or registered by the Australian Pesticides and Veterinary Medicines Authority;
- cannabinoids;
- the provision of medication(s) that covers a period of more than 30 days beyond your policy *end date*;
- chemical castration, suprelorin implants or other desexing procedures, unless required to treat the eligible *condition* affecting your pet's reproductive organs due to a *condition* covered by your policy;
- breeding or obstetrics and/or any related complications; or
- any disease that affects dogs or cats that is the subject of a biosecurity emergency declaration under the *Biosecurity Act 2015* (Cth).

Specific services and procedures

Unless the relevant item appears on your *certificate of insurance*, we don't provide cover or pay benefits for the following:

- transport or boarding expenses other than those for emergency pet boarding;
- any travel or repatriation costs;
- shipping or freight costs;
- ambulance fees and non-essential hospitalisation;

- training and socialisation;
- additional costs associated with house calls; if your pet requires a *consultation* at home as they are unable to attend a clinic, our liability is limited to the cost of the *treatment* had it been provided at a vet practice during normal consultation hours;
- genetic/chromosome testing; or
- these items and any associated expenses:
- any non-customary, trial or experimental procedures and treatments;
- any procedures or treatments related to the manipulation, modification, or alteration of heart valves, chordae tendineae, or other heart structures including open-heart surgery (with the exception of balloon valvuloplasty) and the implantation, repair or replacement of pacemakers;
- *organ transplant surgery*, cell-replacement therapies including but not limited to stem cell therapy and platelet- rich plasma (blood transfusions are covered where medically necessary);
- wheelchairs, 3D printing or artificial limbs and prosthetics (with the exception of total hip replacements); or
- an autopsy, disposal, burial or cremation of a deceased pet.

Elective treatments and procedures

We don't provide cover or pay benefits for elective treatment including but not limited to cosmetic procedures, declawing, devocalisation (debarking and demeowing), ear cropping, voluntary euthanasia or tail docking.

Note: Essential euthanasia is covered under this policy. It is the humane and necessary euthanasia of a pet which is required as a result of a covered condition.

Lack of protection for your pet

If you neglect your pet or fail to take all reasonable precautions to protect your pet from situations that may result in injury or *illness*, for example participating in organised fighting or hunting activities, we won't provide cover or pay benefits for those resulting vet expenses.

Consequential losses

We don't cover you for any consequential loss, including but not limited to economic loss, loss of enjoyment or any other loss that's not specifically covered in your policy.

Expenses related to an exclusion

We don't provide cover or pay benefits for any expenses relating to policy exclusions. This includes when a diagnosis is inconclusive, but the *treatment protocol* is consistent with an excluded condition, e.g., treatment for potential miscarriage, as expenses associated with breeding and obstetrics are excluded from your policy.

We also don't provide cover or pay benefits for any complications of, or adverse reactions to a policy exclusion. For example, if your pet requires surgery for a patella luxation that is a *pre-existing condition*, any adverse reactions to that procedure would be excluded from cover.

Note: Complications or adverse reactions to the following occurrences don't fall into this category and are assessed as *illnesses*:

- desexing procedures;
- vaccinations; and
- administering preventative flea, tick and worm control products.

Dental, preventative, alternative and integrative items

Unless these items are stated on your *certificate of insurance*, we don't provide cover or pay benefits for the following:

- **Dental care** - dental procedures, dental diseases, gingivitis, teeth cleaning/scaling, orthodontics, crowns, root canal therapy, cosmetic dental surgery or corrective treatment, removal of deciduous teeth, odontoclastic resorptive lesions, odontogenic cysts and any oral disease (with the exception of oral tumours and tooth extraction due to immune-mediated stomatitis and traumatic tooth fractures);

Note: Scaling, polishing, dental x-rays and tooth removal for specified dental conditions may be eligible for cover under *Booster Care* if you have this. See the [Optional benefits](#) section for more information.

- **Preventative/routine items** - preventive and routine items for your pet, including, but not limited to, food (regular or prescription), vitamins/nutraceuticals/supplements, any flea/tick/worm preventative treatments or measures, including but not limited to tick baths, sprays, intestinal worming products whether recommended by your vet or not, vaccinations, microchipping, grooming and bathing of your pet, non-medicated grooming products, regular nail clipping, preventative dew claw removal and routine anal gland expression;

- **Alternative and complementary items** - alternative and complementary medicines and therapies including but not limited to homeopathy, naturopathy, Chinese medicine and Ayurveda; or
- **Integrative** - integrative physical therapies such as acupuncture, physiotherapy, laser therapy, light therapy, shockwave therapy, massage and chiropractic treatment.

Note: Some of these items may be eligible for cover under *Booster Care* if you have this. See the [Optional benefits](#) section for more information.

5. Making a claim

This section covers the claim process and how we settle a claim, along with your responsibilities and our processes for fraud detection.

There's also information in the introduction to this booklet about [Making a claim in 4 easy steps](#).

Asking for a claim pre-approval

If your pet requires *treatment*, you can seek pre-approval for the expected costs. Your vet may also be able to request pre-approval on your behalf. Pre-approvals aren't mandatory, but they can provide you with reassurance as to whether you'll be covered and if so, what benefits will be provided for an upcoming *treatment*.

You (or your vet if they are submitting on your behalf) will need to provide us with the itemised estimate of costs from your vet, along with the *treatment* required and relevant clinical records and/or veterinary history. We'll then respond to you (and your vet if submitted on your behalf) in writing with the outcome. A pre-approval isn't valid unless we've agreed to it in writing.

Note: If we agree to a pre-approval but the *treatment* provided by your vet differs from the *treatment* request in the pre-approval, then our assessment of the amount we cover under your claim may vary from the notified pre-approval amount. A variation in the amount we cover may also occur if you have reached your *benefit limit*, *Booster Care limit* (if applicable), or *Routine Care limit* (if applicable) on the claim.

Making a claim through your vet

Your vet may be able to submit your claim electronically at the time of your visit. If they agree and are able to do this, you're authorising us to receive each claim submitted by your vet on your behalf. All accounts must be paid to your vet in full before making a claim.

Your vet may also be able to submit your claim via the GapOnly® service.

GapOnly® claims

GapOnly® is available at participating vets. GapOnly® reviews and calculates your pet insurance claim benefits while you're still at the vet. If your vet is GapOnly® enabled, you don't need to pay your vet in full prior to the submission of your claim. Instead, your vet submits the claim to us electronically on your behalf and you agree to pay the 'gap' (the difference between the vet's invoice and the claim benefit calculated, if any, under your policy).

You must pay the gap to your treating vet at the time you make a GapOnly® claim. We'll then pay the claim benefit (if any) directly to your vet.

You can find more information on GapOnly® here: gaponly.com.au

Making a claim yourself

You can submit your claims online through the secure [Pet Portal](#). Simply upload your documentation and click submit (from your computer or mobile device).

You can also submit your claim to us by post. If you do this, please ensure your posted claim documentation is accompanied by a completed claim form. Claim forms are available on request by calling 1300 10 1234 or can be downloaded from insurance.everyday.com.au/pet-insurance/useful-documents.

If you choose to claim via post, the attending vet must complete all designated sections on the claim form. Both you and the vet must sign the claim form.

When you submit a claim, please include all relevant invoices and clinical records from your vet. All accounts must be paid to your vet in full before submitting your claim.

Please take care and be honest in the preparation and submission of your claims. This helps us process your claim without undue delay.

Processing your claim

We'll deal directly with you regarding the settlement of the claim. Unless we specify otherwise and unless it is a GapOnly® claim, we'll pay the claim benefits to you, not your vet.

You agree that we're authorised to discuss with your vet, the details relating to your claim or the *treatment* provided to your pet in relation to a claim made under your policy. You also agree that your vet is authorised to view the outcome of your claim, including the amount of claims benefits.

Please note that:

- in some instances, we may require more information to process your claim, such as previous medical history or pathology/laboratory results. We'll contact you or your vet if required;
- there may be situations where we request additional veterinary history from current or previous vets, e.g. if there's a large history gap, to ensure we have all relevant clinical information for your pet;
- for adopted pets, veterinary history is only required from when you took ownership. You'll need to provide us with proof of adoption or transfer of ownership papers;
- if you're making an emergency pet boarding claim, we may require supporting documentation;
- unless we agree otherwise, all of your claims must include itemised tax invoice(s), payment receipt(s) and vet consultation notes if applicable;
- incomplete claim forms may result in a processing delay. We recommend that you retain copies of all documentation for your records;
- you also agree that your current or previous vet or any other service provider that provided *treatments* to your pet is authorised to release information and/or records to us about your pet; and

- you're responsible for any fees and expenses that may be charged to you by any third parties relating to the issue and administration of your policy, assistance provided to you to complete any forms and in relation to claims.

Settlement of your claim

We'll send you a remittance advice regarding the settlement of your claim, by your chosen communication method, outlining the claim outcome and how your claim has been processed. If your claim payment has been settled on the basis that the *treatment* is not reasonable and *customary* or that the *vet expenses* incurred are not reasonable, *customary* and *essential expenses*, we will provide you with additional explanation of the outcome.

For Hollard issued policies, all approved benefits will be paid into your nominated bank account or by cheque. For PetSure issued policies, we'll pay all approved benefits into your nominated bank account.

We reserve the right to deduct from the benefit amount any amount due to us, for example for any overdue premium payments.

Note: In the event that we pay a benefit contrary to the policy terms and conditions for whatever reason, this won't constitute a waiver of our rights to apply the policy terms and conditions retrospectively to any paid claims or to any future claims for that or any related *condition*. We also reserve our right to recover from you any benefit amount received by you as a result of such error.

Proving your claim

If you or your vet refuse to or are unable to provide information reasonably requested by us to process your claim, we may decline or reduce the amount payable for your claim, in accordance with relevant law.

Fraudulent claims

If you submit a fraudulent claim or entice your vet to behave in a fraudulent manner regarding a claim, then the claim may be denied or reduced in accordance with relevant law, and we may cancel your policy altogether in the event you make a fraudulent claim. We may also be entitled to reclaim any payments already made to you in respect of such claims.

For more details, see the [How we prevent or handle fraud](#) section.

How we settle your claim

The best way to show you how we work out how much we pay after you make a claim is with a couple of examples. These are examples only and include GST.

1st claim

This example is a simple case showing how the *policy benefit percentage* and *annual excess* is applied for the first claim made in a *policy period*.

Selected cover:

- **80% benefit percentage**
- **\$25,000 benefit limit**
- **\$200 annual excess**

Vet expenses incurred for treatment of a covered condition	\$1,500
The amount you can claim after applying your 80% benefit percentage	\$1,200
\$200 annual excess	\$200
How much we pay	\$1,000
Your total out-of-pocket expense	\$500
Benefit limit remaining in policy period (\$25,000 less \$200 annual excess paid less \$1,000 for this claim)	\$23,800

2nd claim

This example shows how the *policy benefit percentage* and *annual excess* is applied for the second claim made in the same *policy period* where the *annual excess* has already been paid in full for the previous claim.

Vet expenses incurred for treatment of a covered condition	\$1,500
The amount you can claim after applying your 80% benefit percentage	\$1,200
\$200 annual excess Note: Annual excess not applied in this instance as it was fully paid in the first claim.	\$0
How much we pay	\$1,200
Your total out-of-pocket expenses	\$300
Benefit limit remaining in policy period (\$25,000 less \$200 annual excess paid less \$1,000 previously claimed, less \$1,200 for this claim)	\$22,600

Our right to recover other amounts payable

If we have the right to recover any amount payable under your policy in relation to a claim from any other person, you must provide reasonable cooperation with us in any action we may take.

Telling us about other insurance you have

If you hold other insurance under which you may be entitled to make a claim in relation to eligible vet expenses, you must advise us of this at the time you submit your claim. Total benefits paid to you across all insurance cannot exceed your actual expenses.

How we prevent or handle fraud

Unfortunately, fraud and attempted fraud can occur. We employ sophisticated fraud detection and prevention techniques to ensure we only pay genuine claims. By doing this we're protecting you and all our policyholders.

You must not act in a fraudulent manner. If you or anyone acting for you:

- makes a claim, submits a document, or makes a statement in support of a claim under the policy knowing the claim, document or statement to be false or fraudulently exaggerated in any respect;
- works with your vet to behave in a fraudulent manner regarding a claim, e.g., pressuring your vet to note incorrect information; or
- makes a claim in respect of any loss or damage caused by your willful act or by colluding with another person;

Then:

- we may be entitled to refuse to pay all or part of the claim, to the extent permitted by law;
- we may cancel your policy and any other insurance policies you hold with us;
- we may be entitled to reclaim any payments already made to you in respect of such claims;
- we may not refund a premium already paid, to the extent permitted by law; or
- we may inform the police of the circumstances, and we may take legal action.

6. Paying your premium

Your insurance policy cover is provided on the basis that you've paid or agreed to pay us the premium for that cover. The amount you pay is shown on your *certificate of insurance*. It includes all premium, administration fees and any applicable discounts, government taxes, fees and/or charges.

We like to think we don't miss a thing, but if you have a question about anything on your *certificate of insurance*, please contact us.

How to pay

Your pet insurance premium is payable when you take out a new policy and subsequently when your policy is renewed or replaced in accordance with the [Automatic renewal or replacement of your policy](#) section.

Premiums can be paid via direct debit through a credit card or bank account:

- annually;

OR

- in monthly or fortnightly instalments.

If we accept and pay a claim under your policy, we may deduct the balance of any outstanding premium from the claim payment.

Paying on time

You need to make sure your premium payment(s) are up to date. If you have a policy that you're paying by instalments and we haven't received an instalment payment by its due date, we'll send you a notice in writing by mail, email or text message about your non-payment.

This will be at least 14 calendar days before any cancellation of your policy for non-payment.

If we don't receive the instalment payment after sending this notice, we'll send you a second notice in writing, again by mail, email or text message.

This will happen either:

- prior to cancellation of your policy, informing you that your instalment policy is being cancelled for non-payment if the unpaid premium remains in arrears for more than one month;

OR

- within 14 calendar days after cancellation by us, confirming our cancellation of your instalment policy after the unpaid premium was in arrears for at least one month.

If one or more instalments has remained unpaid for a period of at least 14 calendar days, then we reserve the right to reduce any claim made on the policy by the amount of any outstanding premium.

Cancellation consequences

If we cancel your policy due to non-payment of an instalment premium, please be aware that:

- no benefits or entitlements will be payable under the policy for vet expenses or other claims expenses incurred after the cancellation date;
- applications for other general insurance products administered by PetSure may be refused; and
- any application for general insurance products (with any provider) in the future may be affected because you had a policy cancelled because of unpaid premiums.

Your payment account

When you provide us with your nominated credit card or bank account details, we use these to directly debit the premium calculated by us from that card or account.

Unless you opt out of the automatic renewal or *replacement policy* process or cancel your policy, we'll continue to deduct/charge the premium from your nominated credit card or bank account after the renewal or replacement of your policy. See the [Renewals, cancellations & changes](#) section for more details.

If your premium can't be paid, e.g. there isn't enough money in your nominated account, you may be charged a fee by your bank. It's important that you know that neither Hollard nor PetSure will be responsible for fees charged by your bank or financial institution.

If your direct debit fails, we'll notify you of this and automatically retry for the outstanding amount within 14 calendar days. Should this second attempt fail, we'll try again after 14 calendar days and, depending on your payment frequency, we'll deduct either the outstanding amount, or the outstanding amount together with your regular instalment.

If you'd like to make a real-time payment of your outstanding balance before we reattempt a direct debit, just call us to do this.

For payments by direct debit

For Hollard issued policies, if the direct debit bank account is not yours, you confirm you have the authority of the account holder to use it and that they've agreed to these terms.

For PetSure issued policies, you must have the sole authority as the account holder of the direct debit bank account and agree to the Direct Debit Request Service Agreement.

For payments by credit card

If the credit card is not yours, you confirm you have the authority of the credit card account holder to use it and that they've agreed to these terms.

Should you have questions about the operation of the direct debit authority or you need to change any aspects of the authority, please contact us.

7. Renewals, cancellations & changes

This part of the booklet explains your options for renewing, cancelling or changing the cover for your pet insurance policy.

Automatic renewal or replacement of your policy

Annual renewal of your policy

As long as we continue to provide the product, we'll offer renewal of your policy every year. This will be subject to the applicable terms and conditions of the policy for each *policy period*. We'll change the premium and may change the terms and conditions of the policy at the time of renewal, based on a combination of factors, including the risk associated with insuring pets like yours.

Replacement policy process

For policies issued by Hollard only

In the event that Hollard no longer issues this Everyday Pet Insurance product, Hollard may arrange for PetSure to provide you with an offer of a *replacement policy*, together with its applicable terms and conditions for you to consider. The *replacement policy* will automatically commence when your issued policy is due to expire unless you instruct us beforehand otherwise.

For policies issued by PetSure only

In the event that PetSure no longer issues this Everyday Pet Insurance product, PetSure may arrange to provide you with an offer of a *replacement policy*, together with its applicable terms and conditions for you to consider. The *replacement policy* will automatically commence when your issued policy is due to expire unless you instruct us beforehand otherwise.

For all renewals and *replacement policies*

Unless you've told us beforehand that you've chosen not to automatically renew or not automatically accept the offer of a *replacement policy*, your policy will automatically renew or, where applicable, your *replacement policy* will automatically commence on those terms.

Where you have opted out of automatic renewal or automatic acceptance of the offer of replacement, you'll need to contact us after you've received your offer if you'd like to accept the policy terms.

Any renewal or *replacement policy* offer notice you receive will also remind you:

- that you can opt out of the automatic renewal or automatic *replacement policy* process at any time in the future;
- to check the information we have on your *certificate of insurance* is correct; and
- to review your insurance cover to consider if the policy limits and level of cover is still right for you.

Unless you opt out of automatic renewal or automatic acceptance of the offer of a *replacement policy* or tell us that you don't want to renew or replace your policy, PetSure (if it is the renewal or *replacement policy* issuer) or Hollard (if it is the renewal issuer) will deduct/charge the premium from your nominated account or credit card on any automatic renewal or *replacement policy*, as applicable. See the [Paying your premium](#) section for more information.

Your premium

Every year, we'll notify you of the changes to your annual premium. We review the cost of everyone's insurance, taking account of a range of factors. These are set out under the [How we calculate your premium](#) section.

Cancellation by you

You can cancel your policy with us at any time by contacting the Everyday Pet Insurance customer service team. Our [Contact details](#) are on the last page of this booklet.

The cancellation will be effective once we provide you with a written confirmation of your request, either by email or letter.

We'll retain the portion of the premium that relates to the period that you've been insured up to your cancellation date. Where you have paid for a period in advance (e.g., for the full fortnight, month or year), we'll refund that proportion of premium for the time remaining on the policy (less any non-refundable government or statutory charges).

If your pet passes away

We know there is a lot going on when your pet passes away, but we're here to help. Please contact us as soon as possible and we'll cancel your policy from the date of your pet's passing. We'll adjust the premium, as outlined above.

Your cancellation rights during the cooling off period

Your cooling off cancellation rights apply when you are first issued your policy and also exist when your policy renews or is reissued following a change in your cover. You can find more information in the [Cooling off period](#) section.

Cancellation by us

We may cancel your policy where permitted by and in accordance with the law. We'll give you notice in writing before exercising any right to cancel your policy. For example, if you:

- do not comply with the policy terms and conditions;
- do not pay your premium as agreed;
- make a fraudulent claim; or
- did not comply with your duty to take reasonable care not to make a misrepresentation.

If we cancel your policy, we'll retain and/or refund any premium as the law allows us to do so.

Changing your cover

You can change the cover for your pet by choosing cover with different or additional benefits, where eligible and available to you. You may, for example, want a different *benefit percentage* or *annual excess*, or want to add an optional benefit.

If you haven't had a claim paid and want to change your cover, just contact us and we'll issue you a new policy number and certificate of insurance outlining your revised premium and changed cover details.

However, you can't change your cover if a claim has been paid during your current *policy period*. You'll need to wait until your next policy renewal (or issue of a *replacement policy* in accordance with the *replacement policy* process, where applicable).

Waiting periods already completed won't be reapplied unless there has been a break or lapse in your cover. If you change the Everyday Pet Insurance product and/or level of cover you have for your pet, with a different product and/or level of cover, *waiting periods* will only apply to any conditions or benefits covered by the new product and/or level of cover that weren't covered under your previous product and/or level of cover.

8. Other important information

This section includes other important information on how we communicate with you, your duty to take reasonable care not to make a misrepresentation, how we calculate your premium and more.

Delivery of your policy documents

Unless you instruct us otherwise, we prefer to send your policy documents and communicate with you electronically. Where you've agreed to receive electronic communications, you'll need to provide us with your email address and mobile number.

When we send your policy documents by email, we'll consider that you have received them on the date recorded on our information system.

You can instruct us to provide these documents by post, to a mailing address you provide, either when you purchase your policy or at any time by contacting Everyday Pet Insurance.

You're responsible for making sure the email and postal addresses you've given us are correct and up to date at all times.

Your duty to take reasonable care not to make a misrepresentation

Before you enter into this contract of insurance with us, you have a duty to take reasonable care not to make a misrepresentation under the *Insurance Contracts Act 1984* (Cth).

This means you need to take reasonable care to provide honest, accurate and complete answers to any questions that we ask. It is very important that you do so, as we base our decision whether to provide cover and the terms on which we do so on your answers.

If you're not sure of the answers to any of our questions, you should take the time to find them. It's also important to understand that, in answering the questions, you're answering for yourself and anyone else to whom the questions apply.

If any of our questions aren't clear and you need help, please contact us.

When this duty applies

The duty to take reasonable care not to make a misrepresentation also applies before you renew, vary, extend or reinstate an existing contract of insurance. This means that you must inform us of any changes to the information set out in your *certificate of insurance*, where the information is no longer honest, accurate and complete. If you don't contact us to update this information, we'll take it that you agree that the information remains honest, accurate and complete. Please contact us if you have any doubts.

If you don't comply with your duty

If you don't take reasonable care in answering our questions or inform us of changes to the information set out in your policy documents, you may breach your duty. If that happens, your policy may be cancelled, or treated as if it never existed, and any claim may be denied or not paid in full.

Updates to the PDS

We may need to update this PDS from time to time when certain changes occur and where we're required and permitted by law to do so. If that happens, we'll issue you with a new PDS or a Supplementary PDS or other compliant document to update the relevant information.

Where the information isn't materially adverse from the point of view of a reasonable person considering whether to buy or continue to hold this insurance, we may issue you with notice in a different form, including but not limited to disclosure updates on the PetSure and/or Everyday Pet Insurance website(s).

You can contact us to get a free paper copy or download an electronic copy that summarises these changes.

How we calculate your premium

Your premium is calculated when your Everyday Pet Insurance policy begins, at each policy anniversary, and also if you vary your cover. The premium for each *policy period* is printed on your *certificate of insurance*.

The amount you pay also includes allowances for government fees, taxes and charges, including stamp duty and GST.

For new policies

For new policies (excluding policies issued as *replacement policies*), we calculate your premium based on several factors. Some are pre-set and don't vary, e.g. amounts we consider for some internal expenses. Others can affect the premium amount depending on whether we believe it increases or decreases the risk to us. For example, the type of cover and options you have selected.

We'll also take into account risk factors associated with you and your pet such as your pet's breed and age.

For instance, as your pet gets older the risk of your pet requiring treatment will increase and so the premium increases.

There are also commercial factors that affect your premium, including costs associated with operating our business and our commercial arrangements.

Your premium calculation may also include discounts or promotional offers that we provide. If you qualify for two or more discounts, we apply a specific order to our calculation of your final premium.

Also, any discounts and/or your premium may be rounded up or down and some may only apply in the first year of cover.

For renewals, changes to your policy and policies issued as *replacement policies*

For renewals and *replacement policies*, as well as the factors for new policies we also factor in the claim history for your pet and the average cost of care for pets like yours, as well as the claims experience across all our insured pets. Because of all of these factors and the changes to your pet's risk profile, your premium will increase from year to year.

When calculating your premium on renewal or for a *replacement policy*, we also consider how much your premium was previously, including any discounts that may have been applied. This means that we may limit movements up or down.

These same factors and others are also used to calculate your premium if you amend your cover.

For information about how and when to pay your premium, please read the [Paying your premium](#) section.

Cooling off period

You have a 21 day period to ensure you're happy with every aspect of your policy.

During this time, you can contact us and cancel your policy. If we receive your request to cancel your policy within the 21 day period after the policy *commencement date* or renewal date and as long as you've not made a claim or intend to make a claim, we'll give you a refund of any monies received since that date. We may also deduct any taxes or duties that we're unable to refund.

If you've made a claim during the cooling off period and wish to cancel your policy, then any refund will be in accordance with provisions set out in the [Cancellation by you](#) section.

After the cooling off period ends, you'll still be able to cancel your policy and you have rights upon cancellation in certain circumstances under the policy. See the [Cancellation by you](#) section for more information.

How to make a complaint

We hope you'll never have reason to complain, but if you do, we'll do our best to work with you to resolve it.

Our complaints resolution process has 3 steps. Please let us know if you require additional assistance to lodge a complaint.

Immediate Response

If you have a complaint, we'll take steps to resolve it as soon as possible. We'll acknowledge your complaint within one business day of receiving it.

Please contact us by:

Phone: 1300 10 1234

Writing: Customer Service Complaints
Everyday Pet Insurance
Locked Bag 9021, Castle Hill, NSW 1765

Website: insurance.everyday.com.au/pet-insurance

Please supply your policy number if you have one, to enable the enquiry to be dealt with promptly and by someone with appropriate authority.

Internal Dispute Resolution

If we haven't resolved your matter to your satisfaction, at your request we'll escalate your complaint for review by our Internal Disputes Resolution team.

Please use the same contact information in **step 1** to make this request.

All escalated matters are acknowledged within one business day of receipt. The Internal Dispute Resolution team will review your complaint and any supporting evidence. After full consideration of the matter, a written final response will be provided to you, outlining the decision reached and the reasons for the decision.

External Dispute Resolution

If your complaint is still not resolved to your satisfaction, or a final response has not been provided to you within 30 days, you can refer the matter to the Australian Financial Complaints Authority (AFCA), providing your matter is within the scope of the AFCA Rules.

AFCA is an independent dispute resolution service provided free of charge.

You can contact AFCA at:

Australian Financial Complaints Authority

Mail: GPO Box 3, Melbourne VIC 3001
Phone: 1800 931 678
Website: afca.org.au
Email: info@afca.org.au

Goods and Services Tax (GST)

All monetary limits in your policy are in Australian dollars and are inclusive of *GST*. In the event of a claim, if you're not registered for *GST*, we'll pay any amount due under the policy inclusive of *GST*. If you're registered for *GST*, we'll deduct your input tax credit entitlement from the claim and you'll need to claim that from the Australian Taxation Office. If you're registered as a business and have an Australian Business Number, you must advise us of your correct input tax credit percentage.

Note: You'll be liable to us for any *GST* liability we incur arising from your incorrect advice or inaction.

General Insurance Code of Practice

Hollard and PetSure are members of the Insurance Council of Australia and signatories of the General Insurance Code of Practice (**the Code**).

The objectives of the Code are:

- to commit us to high standards of service;
- to promote better, more informed relations between us and you;
- to maintain and promote trust and confidence in the general insurance industry;
- to provide fair and effective mechanisms for resolving complaints you make about us; and
- to promote continuous improvement of the general insurance industry through education and training.

The Code Governance Committee is an independent body that monitors and enforces compliance with the Code. The Code Governance Committee is also responsible for imposing sanctions for breaches of the Code, as well as the improvement of the Code and assisting the general insurance industry to understand and comply with the Code.

You can obtain a copy of the Code from the Insurance Council of Australia website at insurancecouncil.com.au

Financial Claims Scheme

Should Hollard or PetSure be unable to meet its obligations to you under the policy, you may be entitled to a payment under the Financial Claims Scheme (**the Scheme**).

Access to the Scheme is subject to eligibility criteria. Further information about the Scheme can be obtained at apra.gov.au

Your privacy

We are committed to handling your personal information responsibly, in accordance with our Privacy Policy and the Australian Privacy Principles. When we collect personal information from you, we will provide you with a Privacy Collection Notice which tells you how your personal information is collected, used and disclosed in relation to your Everyday Pet Insurance policy.

You can visit our website to view or obtain a copy of our Privacy Policy or contact us at:

Everyday Pet Insurance

Website: insurance.everyday.com.au/pet-insurance

Phone: 1300 10 1234

Email: privacy@woolworths.com.au

PetSure

Website: petsure.com.au

Phone: (02) 9842 4800

Email: privacy@petsure.com.au

Hollard

Website: hollard.com.au

Phone: (02) 9253 6600

Email: privacy@hollard.com.au

Financial Services Guide (FSG)

This Financial Services Guide, or FSG, informs you about the financial services provided by the organisations associated with Everyday Pet Insurance. It also tells you how each is paid for their services, how complaints are dealt with, and how each organisation can be contacted.

In this FSG:

- PetSure means PetSure (Australia) Pty Ltd.
- Woolworths means Woolworths Group Limited.
- Hollard means The Hollard Insurance Company Pty Ltd.
- You, and your means the applicant for an Everyday Pet Insurance policy and, if a policy is issued, the person insured.

Renewals of Everyday Pet Insurance policies that were first issued before 17 July 2023 are issued by Hollard.

All other Everyday Pet Insurance policies (including *replacement policies* and their subsequent renewals) are issued by PetSure.

The organisations associated with this insurance product

Policies issued by PetSure

PetSure is an Australian Financial Services Licensee (AFSL 420183) authorised to provide general advice and deal, as well as provide claims handling and settling services, in relation to all general insurance products. PetSure is the insurer and issuer of Everyday Pet Insurance policies entered into for the first time from 17 July 2023, including *replacement policies* and their subsequent renewals. In providing the financial services set out in this FSG, PetSure does not provide personal advice and does not act for you.

Woolworths is an Authorised Representative (Number 245476) of PetSure and is authorised to deal in and provide general advice on behalf of PetSure regarding certain general insurance products issued by PetSure, including Everyday Pet Insurance policies. Woolworths distributes, promotes and arranges Everyday Pet Insurance policies and is paid a commission and other benefits for doing so. Everyday Pet Insurance policies are arranged on behalf of PetSure. When you apply for an Everyday Pet Insurance policy, Woolworths will tell you about the product and collect certain information from you that will be used by PetSure to determine, whether an Everyday Pet Insurance policy can be issued to you by PetSure. Woolworths does not act for you and does not provide personal advice about Everyday Pet Insurance policies.

As the insurer and issuer of Everyday Pet Insurance policies, only PetSure can issue, vary and cancel those policies.

Policies issued by Hollard

Hollard is an Australian Financial Services Licensee (AFSL 241436) authorised to provide advice and deal, as well as provide claims handling and settling services, in relation to all general insurance products. Hollard is the insurer and issuer of renewals of Everyday Pet

Insurance policies first issued before 17 July 2023. In providing the financial services set out in this FSG, Hollard does not provide personal advice and does not act for you.

PetSure is an Australian Financial Services Licensee (AFSL 420183) authorised to provide general advice and deal, as well as provide claims handling and settling services, in relation to all general insurance products. In providing the financial services set out in this FSG, PetSure does not provide personal advice and does not act for you.

For Hollard issued policies, PetSure has been given a binding authority by Hollard which authorises it to enter into, vary and cancel policies on behalf of Hollard as well as manage, administer and settle claims as if it were Hollard, subject to the limits of authority agreed with Hollard.

Woolworths is an Authorised Representative (Number 245476) of Hollard and is authorised to deal in and provide general advice on behalf of Hollard regarding certain general insurance products issued by Hollard, including Everyday Pet Insurance policies.

Woolworths distributes, promotes and arranges Everyday Pet Insurance policies and is paid a commission and other benefits for doing so. Everyday Pet Insurance policies are arranged on behalf of Hollard. When you apply for an Everyday Pet Insurance policy, Woolworths will tell you about the product and collect certain information from you that will be used by PetSure to determine, on behalf of Hollard, whether an Everyday Pet Insurance policy can be issued to you by Hollard. Woolworths does not act for you and does not provide personal advice about Everyday Pet Insurance policies.

As the insurer and issuer of Everyday Pet Insurance policies, only Hollard can issue, vary and cancel those policies through an arrangement with PetSure, as explained above.

How we're paid for our services

When you are issued an Everyday Pet Insurance policy you pay the premium to the policy issuer for the product.

Woolworths is paid a commission for promoting and arranging the sale of Everyday Pet Insurance policies.

For each policy sold after 17 July 2023, Woolworths will receive a commission of:

- at least \$115 plus indexation as per the Consumer Price Index (CPI) for pets younger than 10 years, or
- up to 30% of the net premium.

The commission is calculated after any government taxes and charges. This commission is used by Woolworths to cover costs associated with the marketing and distribution of this product to you and costs associated with providing administration services, including set-up and operational costs, telecommunication charges and the costs associated with recruiting, training and engaging call centre consultants. This commission may also include any referral fees to people or organisations that refer new customers to Woolworths.

Our consultants are paid an annual salary and may also qualify for a bonus of up to \$5 per hour, dependent on their individual performance objectives. Such bonus payments are calculated based on predetermined criteria including, amongst other things, the volume of sales and a consultant's performance measured against agreed service levels. The payments made to consultants are not additional charges to you and are not in addition to the total premium you pay.

For Hollard issued policies, PetSure receives from Hollard (the policy issuer) a portion of the underwriting profit, if any, for administering Everyday Pet Insurance policies.

You can request more details about remuneration or other benefits from the relevant entity providing the relevant financial service. However, the request must be made within a reasonable time after you've been given this booklet and before the relevant financial service has been provided to you by them.

Our [Contact details](#) are on the last page of this booklet.

Our compensation arrangements

The Corporations Act 2001 (Cth) requires Australian financial services licensees to have arrangements for compensating retail clients for losses they suffer as a result of a breach by the licensee or its representatives of Chapter 7 of that Act, unless an exemption applies. Those arrangements include a requirement that the licensee hold professional indemnity insurance cover.

As insurers, both Hollard and PetSure are exempt from this requirement because they are insurance companies supervised by the Australian Prudential Regulation Authority (**APRA**) and are subject to the prudential requirements under insurance legislation regulated by APRA.

In accordance with section 912B of the Corporations Act, Everyday Pet Insurance has Professional Indemnity Insurance in place which extends to claims in relation to the financial services it provides when distributing insurance products issued by PetSure and Hollard, including where its employees or representatives, past or present, are negligent in providing financial services on behalf of PetSure.

Conflicts of interest

We take any potential and actual conflicts of interest seriously and have a conflict of interest policy. Conflicts of interest are circumstances where some or all of your interests are or may be inconsistent with or diverge from some or all of our interests.

We manage conflicts of interest through controls, disclosure, and avoidance. We also provide training to our employees to identify conflicts of interest and encourage the early reporting of potential conflicts of interests.

Giving us instructions

You can instruct us through the Everyday Pet Insurance customer service team by post, phone or email. Our [Contact details](#) are on the last page of this booklet.

Your privacy

Refer to the [Your privacy](#) section of the PDS and any Privacy Collection Notice provided to you for further information on what we do with your information.

How to make a complaint

Refer to the [How to make a complaint](#) section in the PDS for further information on how complaints are dealt with.

Authorised for issue

Policies issued by PetSure

This FSG was prepared by Everyday Pet Insurance and PetSure (as it relates to the financial services provided by PetSure) on 29 January 2026.

Policies issued by Hollard

This FSG was prepared by Hollard, Everyday Pet Insurance and PetSure (as it relates to the financial services provided by each of them) on 29 January 2026. It has been authorised for distribution by Hollard.

Definitions of important terms

This section contains the definitions of important insurance terms we talk about in this booklet. Words that are italicised in this booklet have the special meaning explained in this section.

Accidental injury means physical harm to your pet that results from:

- an unexpected and unintended external event that occurs suddenly at a specific time and place; or
- poisoning, intoxication, a venomous bite or sting or thermal- related conditions such as heatstroke or frostbite.

An *accidental injury* excludes any harm resulting from a *behavioural condition, specified dental condition* or any sickness or disease.

Annual excess means the amount that you are required to contribute towards the cost of your claim(s) per *policy period*, as selected by you and shown on your *certificate of insurance*.

The *annual excess* is applied on a *per policy period* basis and applied to each claim in the *policy period* until fully paid. The *annual excess* resets when you renew your policy.

The *annual excess* will be deducted from your calculated claim benefits after we apply the *benefit limit* (where applicable), *Booster Care limit* (where applicable) and the *benefit percentage* to your claimed amount.

Refer to the [Making a claim](#) section for an example of how claim payments are calculated.

Note: The *annual excess* does not apply to *Routine Care* items.

Behavioural condition means behavioural conditions diagnosed by a vet including but not limited to anxiety, phobias, compulsive disorders and impulse control problems.

Note: *Behavioural conditions* may be eligible for cover under [Booster Care](#) if you have this.

Benefit limit means the maximum amount that is payable by us in any one *policy period* for cover, except with respect to the optional *Routine Care* and *Booster Care* benefits which have their own additional limits, as is shown on your *certificate of insurance*.

Also Note:

- For each *policy period*, we'll never pay more than the *benefit limit* specified on your *certificate of insurance* for your cover, other than the optional *Routine Care* and *Booster Care* benefits.
- The *benefit limit* resets when you renew your policy. This means that policy benefits for cover don't accumulate across *policy periods*. They expire at the end of each *policy period*.
- The *benefit limit* is also subject to the *annual excess* (if any) applicable to your cover.

Benefit percentage means the percentage of each claim for eligible vet expenses, eligible emergency pet boarding costs, and eligible costs for other covered items which we reimburse, subject to your *benefit limit* (where applicable), the *Booster Care limit* (where applicable) and the *annual excess* (if any).

The applicable benefit percentage will be shown on your certificate of insurance.

Note: The benefit percentage does not apply to *Routine Care* items.

Bilateral condition means any condition affecting body parts on each side of your pet's body, e.g. ears, eyes, knees or elbows. A *bilateral condition* is considered a single condition when determining a *pre-existing condition*.

Example: if your pet had elbow dysplasia in the left elbow prior to the commencement date of the *first policy period* or during the applicable *waiting period*, and this falls within the definition of a *pre-existing condition*, a subsequent elbow dysplasia in the right elbow will still be considered a *pre-existing condition*.

Booster Care means the *Booster Care* optional benefit described in the Optional benefits section which provides cover for specified dental conditions and specialised therapies subject to the *Booster Care limit*, *annual excess* (if any) and benefit percentage applicable to your policy. If you select to have *Booster Care*, it will be shown on your certificate of insurance with the *Booster Care limit*.

Booster Care limit means the maximum amount that is payable by us in any one *policy period* for the optional *Booster Care* benefit (including with respect to both *specified dental conditions* and *specialised therapies*), which is additional to the *benefit limit*. The *Booster Care limit* is shown on your certificate of insurance if you have the *Booster Care* benefit.

Also Note:

- For each *policy period*, we'll never pay more than the *Booster Care limit* specified on your certificate of insurance for the *Booster Care* benefit.
- The *Booster Care limit* resets when you renew your policy. This means that policy benefits for the *Booster Care* benefit don't accumulate across *policy periods*. They expire at the end of each *policy period*.
- The *Booster Care limit* is also subject to the *annual excess* (if any) applicable to your cover.

Certificate of insurance is the certificate we provide you that outlines the key details of the contract of insurance between you and us. It includes the policy number, cover, commencement date, end date, insured pet details, and the schedule of benefits, including your *benefit percentage*, *benefit limit* and *annual excess* (if any). If you have selected the optional *Booster Care* benefit and/or *Routine Care* (non- insurance benefit), the certificate of insurance will also list the details of these options including the applicable limits.

Note: A certificate of insurance is issued to you when we issue your policy to you, on each renewal, and whenever your policy is amended.

Chronic condition means a long-lasting condition which is recurring or present in your pet over a period greater than three months in total, however the three-month period need not be consecutive. *Chronic conditions* may also be intermittent or managed with medication and/ or prescription diets with intervals of remission.

Examples include (but aren't limited to) chronic or seasonal allergies, inflammatory bowel disease, diabetes, osteoarthritis, cancer and some autoimmune diseases.

If a *chronic condition* is a *pre-existing condition*, it will always be excluded from cover. That means, it will never be considered a *temporary condition*.

Commencement date unless otherwise specified, is the date when cover for your pet started in the current *policy period* as shown on your certificate of insurance. The start time is 11:59PM on that date.

Note: Also see the *first policy period* definition for commencement date of *first policy period*.

Condition means any *accidental injury*, or any manifestation of an illness. Where you have the *Booster Care* benefit, this also includes a *specified dental condition* and a *behavioural condition*.

Consultation and other derivations means an examination performed by or under the supervision of a vet, including a physical consultation, inpatient examination, in-hospital examination, health certificate, consultation or recheck consultation/visit, referral/specialist consultation/visits, phone consultation, web consultation and emergency and after-hours consultations/visits.

Cover means:

- Cover for *accidental injuries*, *illnesses*, *emergency pet boarding*, and any other optional benefits (together with their limits) applicable to your selected policy.

AND

- The cover applicable under your current policy, previous *Everyday Pet Insurance* policies or any policy replaced via the *replacement policy* process where the same or a substantially similar or a higher level of cover was provided in the current *policy period*, without any break or time without holding the cover.

Cruciate ligament condition means partial or complete rupture of the cruciate ligament(s). This includes meniscal tears, any looseness of the cruciate ligaments, along with any complications following treatment for this condition.

Customary means:

- In relation to *treatment*, usually practiced procedures and services that are widely available and accepted by veterinary professionals for a pet in similar circumstances;
- In relation to *vet expenses*, the typical or standard expenses for those procedures and services for a pet in similar circumstances; and

- In relation to emergency pet boarding, the typical or standard boarding costs for a pet in similar circumstances. For the avoidance of doubt, this excludes costs related to additional add-on services provided by the boarding facility.

Elective treatment means a treatment or surgery that is beneficial to your pet but is not essential for your pet's survival and doesn't form part of the treatment for a covered condition.

End date means the date when your policy terminates. No further benefits or entitlements can be paid under the policy for vet expenses or other claims expenses incurred after the *end date*. The end time is 11:59PM on that date.

Unless otherwise specified, this relates to the *end date* of your current *policy period*.

The *end date* is shown on your *certificate of insurance*. If the policy is cancelled, then the date of cancellation will be deemed to be the *end date*.

First policy period means the time during which cover was first issued to you by us (regardless of whether this is a *replacement policy*), so long as there has been no break or lapse in cover for your pet. In the event of a break or lapse in cover for your pet, the *first policy period* means the time during which cover was first issued to you, after the break or lapse in cover. For clarity, the *commencement date* of your *first policy period* is 11:59PM on the date when cover for your pet first started.

GST means the Australian Goods and Services Tax at the officially published tax rate.

Illness means a sickness or disease that is not an *accidental injury*, *specified dental condition* or *behavioural condition*.

Organ transplant surgery means the procedure in which an organ/s, tissue or group of cells are removed from one animal (the donor) and transplanted into another animal (the recipient).

Pet means the dog or cat covered under the policy and named on your *certificate of insurance*.

Policy period means the time during which we provide cover as specified on your *certificate of insurance*.

Note: Unless otherwise specified, this relates to your current *policy period*.

Pre-existing condition means a condition that first existed or occurred:

- prior to the *commencement date* of the *first policy period*; or
- within any applicable *waiting period*;

AND

- of which you were aware of, or a reasonable person in your circumstances would have been aware, irrespective of whether the underlying or causative condition has been diagnosed.

A *pre-existing condition* also includes a *related condition* or *bilateral condition* of a *pre-existing condition*.

Related condition means a condition that results from the same disease process, arises as a consequence of or has the same diagnostic classification as another condition, regardless of the number of areas of your pet's body that are affected.

Examples:

- If your pet suffers from arthritis in its legs, all future occurrences of arthritis, e.g. in the back or neck, will be *related conditions*.
- If your pet suffers from diabetes and then develops a cataract as a consequence of the diabetes, the cataract will then be a *related condition*.
- If your pet suffers from a skin hotspot, then later suffers from ringworm on its skin, these aren't *related conditions*, as the ringworm is not as a consequence of the hotspot, nor do they follow the same disease process or diagnostic classification.

Replacement policy means an Everyday Pet Insurance policy that is issued by PetSure in accordance with the replacement policy process (see [Automatic renewal or replacement of your policy](#) section) when the product is no longer issued by Hollard.

Routine Care means certain pet care items for your pet listed on your certificate of insurance which are non-insurance benefits. If you have these benefits, the list of allowable items and the maximum amount payable during the policy period, are shown on your certificate of insurance.

Routine Care limit means the maximum amount that is payable by us in any one policy period for the optional Routine Care benefit, which is additional to the benefit limit. The *Routine Care limit* is shown on your certificate of insurance if you have the Routine Care benefit.

- For each policy period, we'll never pay more than the *Routine Care limit* specified on your certificate of insurance for the Routine Care benefit.
- The *Routine Care limit* resets when you renew your policy. This means that policy benefits for the Routine Care benefit don't accumulate across policy periods. They expire at the end of each policy period.

Note: The benefit percentage and annual excess do not apply to Routine Care items.

Specialised therapies means any examination, advice, test and legally prescribed medication for the following procedures where they treat an eligible condition.

This covers any treatment specifically needed and recommended by your vet limited to:

- physiotherapy or physical therapy carried out by a qualified animal physiotherapist or vet;
- chiropractic manipulation carried out by a staff member of a veterinary practice, provided the staff member is a qualified animal chiropractor;
- acupuncture carried out by a vet;

- hydrotherapy carried out by a staff member of a veterinary practice in a pool or on a water treadmill owned by the veterinary practice;
- prescribed medication and diagnostic tests for *behavioural conditions* diagnosed by your vet or a *veterinary behavioural specialist*; or
- consultations with a *veterinary behavioural specialist* for *behavioural conditions*.

Note: Cover for specialised therapies is provided under optional [Booster Care](#) if you have selected this.

Specified dental condition means a specified condition listed in the Booster Care [Specified dental conditions](#) section.

Temporary condition means a condition that normally resolves with treatment, but does not include:

- *cruciate ligament conditions*;
- *intervertebral disc disease*;
- *hip dysplasia*;
- *elbow dysplasia*;
- *patella luxation* (dislocating kneecap);
- *endocrine diseases*; and
- any *chronic condition*.

Note: This definition is relevant to determining whether a condition is no longer excluded as a *pre-existing condition*. See the [Pre-existing conditions which are temporary conditions](#) section under General exclusions.

Example: Your pet has dietary related gastroenteritis prior to the commencement date of your *first policy period*. This is resolved with medication. Your pet does not suffer any further instances of dietary related gastroenteritis until three years later. This *condition* would be a *temporary condition* that has not existed, occurred or shown noticeable signs, symptoms or an abnormality in the 18-month period immediately prior to the second gastroenteritis episode. It would not be a *pre-existing condition* and therefore would be covered, subject to your policy terms and conditions.

Treatment has different meanings for *accidental injury* and *illness* cover and for the *Booster Care* benefit.

For *accidental injury* and *illness* cover treatment means:

- reasonable and customary treatment including *consultations*, hospitalisation, surgery, x-rays, medication, diagnostic tests, nursing and other care and procedures provided by a vet to relieve or cure an *accidental injury* or *illness* during the *policy period*.

For the *Booster Care* benefit (where selected) treatment means:

- for the purposes of *specialised therapies*, treatment is limited to those items and those types of reasonable and customary treatment described in the [Specialised therapies](#) section.
- for the purposes of *specified dental conditions*, treatment is limited to those items and those types of reasonable and customary treatment described in the [Specified dental conditions](#) section.

Vet means any veterinarian, veterinary specialist, animal hospital, animal clinic, or animal surgery, other than yourself, who is licensed in and currently registered in Australia.

Note: For the purposes of *specialised therapies* (if you have *Booster Care*), a vet also includes a qualified animal chiropractor for chiropractic manipulation, a qualified animal physiotherapist, a qualified animal hydro therapist for hydrotherapy, and a *veterinary behavioural specialist* for treatment and diagnosis of behavioural conditions.

Veterinary behavioural specialist means a vet who has completed further study in animal behaviour such as FANZCVS and/or DACVB and/or DipECAWBM or a vet directly training under a *veterinary behavioural specialist*.

Vet expenses means the reasonable, customary and essential expenses incurred in respect of *treatment* provided by a vet during the *policy period*, considering the circumstances in which the *treatment* was provided.

Waiting period means the period that your pet is not covered as specified in the *Waiting periods* section of this booklet and starts from the *commencement date* of your *first policy period* in which you obtained cover for the applicable *condition* or *benefit*.

Note: For more information, see the [Waiting periods](#) section.

Contact details

Everyday Pet Insurance

Phone: 1300 10 1234
Email: everydayinsurance@petsure.com.au
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Hollard

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Get a quote today

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