



**Re: Pet Insurance Claim Form Download**  
**Our Ref: Boarding Fees**

Thank you for downloading a claim form; please ensure that the attached claim form is fully completed by your Doctor and attach the following information:

- Invoices from the Cattery/ Kennel/ Rabbit Hotel or a signed statement from the appointed person who has cared for your pet.

Claim forms can be sent across to us by fax on 01423 532 791, by email at [petclaims@ncionline.co.uk](mailto:petclaims@ncionline.co.uk) or by the address which is detailed on your claim form.

Following the receipt of the above information, we will look to assess your claim as quickly as possible.

Please ensure that all your contact details are correctly completed on the claim form, so that we can keep you updated on your claims progress.

We have now improved our service offerings and our preferred method of settling claims is now via BACS (Banks Automated Clearing System); meaning that we can now process claims even more efficiently.

If your claim is approved and you are currently paying for your pet's insurance policy by monthly direct debit, we are now able to issue the payment of your claim to this account directly. Alternatively, if you paid for your policy in full, please can you provide us with your bank account details by contacting us on the details above, so that you can also benefit from a quicker claims settlement. In the event that your veterinary practice is handling your claim, we can issue a BACS payment directly to them, providing we hold their bank account details.

In the event that you would like a claims payment to be issued to anyone other than yourself, if we have not been provided with their bank account information, any payments of this nature will be settled by cheque.

If you have any additional queries regarding this claim, please don't hesitate to contact us by using the above email address or by telephone on 01423 535 057.

Kind regards

*Craig Lambert*

Pet Claims Team Leader  
On behalf of the Pet Claims Team  
NCI Pet Insurance



This claim form should be completed and returned to:  
NCI Pet Insurance, 4<sup>th</sup> Floor, Clarendon House,  
Victoria Avenue, Harrogate,  
HG1 1JD

## Claim Form for Boarding Fees

POLICY NUMBER:

### 1A – POLICY HOLDER DETAILS (TO BE COMPLETED BY THE POLICYHOLDER)

Your Name:

Address:

  
Postcode:

Home phone  
number:

Mobile phone  
number:

E-mail address:

### 1B - DETAILS OF YOUR PET (TO BE COMPLETED BY THE POLICYHOLDER)

Your Pet's Name:

Dog

Cat

Rabbit

Male

Female

Breed:

Date of Birth:

 /  / 

Date of purchase:

 /  / 

### 2a – DETAILS OF HOSPITALISATION (TO BE COMPLETED BY THE PATIENT'S GP/ HOSPITAL PRACTITIONER/SURGEON)

Patient's G.P.  
details

Name:

Address:

Phone number:

Condition requiring  
hospitalisation

Date of first visit to  
any doctor for this  
condition

Details of  
admitting  
hospital

Name

Address:

Phone number:

Dates patient  
hospitalised

From:

To:

### 2b – DECLARATION FROM PATIENT'S GP/ HOSPITAL PRACTITIONER/ SURGEON

I declare to the best of my knowledge  
and belief, the information I have given  
is true and complete.

NAME:

SIGNATURE:

### 3a – DETAILS OF CARER (KENNEL/ CATTERY/ RABBIT HOTEL PROPRIETER OR HOME CARER TO COMPLETE)

Details of  
kennel/ cattery/  
rabbit hotel/  
home carer:

Name:

Address:

Telephone:

Dates pet in  
boarding/ home care:

 to 

Cost of boarding per  
day:

 £ 

Invoice enclosed:

Total being claimed:

 £ 

### 3b – DECLARATION FROM BOARDING PROPRIETER/ HOME CARER

I declare to the best of my knowledge  
and belief, the information I have given  
is true and complete.

NAME:

SIGNATURE: