

Broker/Company: Susman Insurance Agency
Promotion Code: 625



U.S. Application for PetCare Insurance

Date: _____

Mr. Miss Mrs. Ms Dr

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____

Email: _____

Are you applying for a discount? Multi Pet (3) Medical Service Pet

Pet's name: _____ Dog Cat Breed: _____

Sex Male Female Pet's date of birth: D ____/M ____/Y ____

Is your pet microchipped? Yes No Company _____ ID# _____

Is your pet registered with 24PetWatch? Yes No

Would you like someone to contact you with regard to registration with 24PetWatch? Yes No

Please list the veterinary clinics your pet has attended, beginning with present clinic:

Clinic: _____ Phone Number: _____

Clinic: _____ Phone Number: _____

Has your pet ever required medical treatment for an accident or illness? Y N

If yes, Date: _____ Type of illness or accident: _____

Date: _____ Type of illness or accident: _____

Have you had pet insurance previously for this pet? Y N Company: _____

Have you ever been declined pet insurance for this pet? Y N

If yes, list reason(s): _____

Do you have any other pets? Y N If yes, Breed _____ Age: _____

THIS POLICY WILL BE PAID FOR INDIVIDUALLY

Payment Information

- Payment Frequency Monthly Annually
- DIRECT WITHDRAWAL - Please attach a void cheque
- CREDIT CARD (M/C, VISA, Discovery) DEBIT CARD (M/C, VISA)
- Card Number: _____ Expiry Date: ____/____
- ANNUAL CHEQUE (Coverage will not begin until receipt of the annual cheque)

- **Effective Date** - Accident Coverage commences 12:01 a.m. on the day after we receive payment instructions
- **Illness coverage** under QuickCare Gold programs will not commence until 30 days following the Effective date
- There is an annual fee of \$10.00 for monthly payments collected with your first premium payment **

Please confirm the customer understands and acknowledges the following:

- Your pet must have an annual physical exam
 - Routine care and preventative care are not covered
 - Anything pre-existing or symptomatic is not covered
 - Documents of Insurance will be mailed to the pet owner directly
 - As a condition of insurance for insurance, please forward your pet's complete medical history by fax, mail or email
 - If no medical history exists on your pet and/or your pet has not been to the vet within the past 12 months, you agree to have your pet receive a complete physical exam within 30 days
 - There is a 30 day waiting period for QuickCare Gold illness coverage
 - Quick Care Gold - After your pet's 8th birthday (6th birthday for select breeds) coverage is 80% instead of 100%
 - Your pet's accident coverage will begin at 12:01 am on the effective date
 - QuickCare Gold 70% or 100% - Available to dogs & cats enrolled before the age of 8- dogs (6 for select) and 10 for cats
 - You understand the coverage and limits of your policy
 - There is an annual fee of \$10.00 for monthly payments **
 - There is a deductible \$50.00 \$75.00 \$200.00
 - Your policy renews annually (if applicable)
- ** There is no annual fee applicable in Maryland, Missouri, New Mexico**

Customer's Signature _____

Time: _____

Representative's Signature _____

Time: _____

There is a \$10.00 annual administration fee for each policy paid on a monthly basis**. Conditions cannot be noted, symptomatic or pre-existing prior to enrollment. The PetCare Pet Insurance Programs are underwritten by Lincoln General Insurance Company, York, PA and distributed by PetCare Insurance Brokers Ltd., PetCare Insurance Agency Ltd., and Avalon Risk Management Inc. In the U.S. PetCare is a trademark of PETCO Animal Supplies Inc. and is used with permission. Coverage not available in all states.