

Pet Pre-authorisation Form

Send your completed form to claimform@animalfriends.co.uk
Please include 'Pre Authorisation' in the subject line of your email.
If you have any questions, you can call **0344 557 0300**

**Ask your vet to submit
this form** on your behalf
via Pawtal, the online
claims system for vets.



VET TO COMPLETE

For proposed treatment of any amount in a 24-hour period. We aim to process pre-authorisations within 1 working hour.
You can also submit your pre-authorisation on the online claims system – Pawtal.

1. ABOUT YOU

Policy number:

Policyholder's first line of address:

Policyholder's name:

Contact number:

Policyholder's postcode:

Email address:

2. ABOUT YOUR PET

Pet's name:

Pet's breed:

Pet's date
of birth:

D	D	M	M	Y	Y	Y	Y
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Male:

☐

Female:

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When do you want to carry out the treatment?

3. ABOUT THE PET'S CONDITION

Diagnosis/Provisional Diagnosis:

When do you want to carry out the treatment?

D	D	M	M	Y	Y	Y	Y
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Please provide details of the condition and the proposed treatment:

4. DOCUMENTS NEEDED

Please attach the following documents, if you don't the pre-authorisation could be delayed.

- The clinical history that you hold for the pet (*including information from any previous vet if you have it*).
- A detailed and itemised estimate for the treatment you wish to carry out.
- If applicable, the information/form supplied by the referring vet.

5. VET DETAILS

I confirm that all the information provided is correct. The fees for this claim are no more than I would normally charge a client.

Name:

Please sign here:

Date:

D	D	M	M	Y	Y	Y	Y
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6. SUBMITTING THE PRE-AUTHORISATION

The completed Pre-authorisation form and supporting documents should be emailed to claimform@animalfriends.co.uk
or posted to **Animal Friends House, 1 The Crescent, Sun Rise Way, Amesbury, Wiltshire, SP4 7QA**