

Dear Sir/Madam,

Following your request for a claim form please find this now enclosed.

So that we may process your claim as quickly as possible please ensure that you fully complete and sign all the relevant sections and return it to us with the following **ORIGINAL** documentation: (Please note that should you require your original documents returned, you must request this in writing within 90 days of submitting your claim).

Documents Required	Enclosed
1. Insurance policy schedule/certificate of insurance showing payment of your insurance premium.	
2. Original evidence to substantiate travel. E.g. Booking invoice, travel itinerary and/or tickets.	
3. A police report or report of a similar nature, if property was lost/stolen whilst it was <b>not</b> in the custody of a carrier.	
4. If the claim is for property lost, stolen or damaged whilst in the custody of a carrier please forward a copy of their or their agents report, their written confirmation that no payment has been issued to you and all used travel tickets and baggage tags.	
5. Damage claims only - please provide an estimate for repair or if the item is damaged beyond repair we require written confirmation of this from a relevant tradesman, please retain all damaged items as we may require them to be forwarded to our offices.	
6. For all ski equipment claims please provide pre-loss supporting documentation in the form of receipts or visa/bank statements showing the purchase of the items claimed for.	
7. Ski hire claims - receipts for hire expenses incurred, if your claim is a result of a delay by a carrier please provide a copy of their report and their written confirmation of the date and time that you received your equipment.	
8. Ski pack claims - written confirmation from the treating physician in resort that you were unfit to ski and evidence of the pre-paid expenses for which you are claiming e.g. your ski pass.	
9. Piste closure claims - written confirmation from the resort or your tour rep of the circumstances giving rise to the claim and if an alternative site was available receipts for transport expenses incurred in travelling there.	

Your insurance is underwritten by Chartis Insurance UK Limited which is authorised and regulated by the Financial Services Authority (FSA no. 202628). Prior to 1 December 2009, Chartis Insurance UK Limited was known as AIG UK Limited.

Travel Guard provides claims handling services on behalf of Chartis Insurance UK Limited and is also a provider of medical and non-medical travel assistance services. Travel Guard is a trading name of Travel Guard EMEA Limited (formerly AIG Travel Assist International Limited). The change of name makes no difference to your insurance cover or any claims you may make.

When we receive your claim submission, we will assess it and correspond with you further in due course.

Yours faithfully,

**Claims Department**

# Travel Insurance Claim Form.

Travel Claims Department

PO Box 60108, London, SW20 8US

Date Sent:

Claim Ref:

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Please answer all the questions contained in this claim form, leaving items blank, using ticks, dashes and N/A may make it necessary for us to return your claim forms or lead to us asking unnecessary questions thus delaying the processing of your claim.

## Personal Details - Required for all Claims

Mr/Mrs/Miss/Ms	<input type="text"/>	Home Address	<input type="text"/>	
Surname	<input type="text"/>		<input type="text"/>	
Forenames	<input type="text"/>		<input type="text"/>	
Date of Birth	<input type="text"/>		<input type="text"/>	
Occupation	<input type="text"/>	Postcode	<input type="text"/>	
National Ins No.	<input type="text"/>	Home Tel.	<input type="text"/>	Work Tel. <input type="text"/>
Nationality	<input type="text"/>	Email	<input type="text"/>	

## Policy and Holiday Details

Policy Number	<input type="text"/>		
Date Issued	<input type="text"/>		
Travel Booking Reference	<input type="text"/>		
Travel Agent / Tour Operator	<input type="text"/>		
Date of Booking Holiday	<input type="text"/>	No. in Party	<input type="text"/>
Depart Date	<input type="text"/>	Return Date	<input type="text"/>
Total Days	<input type="text"/>		
Destination Country	<input type="text"/>		

## Type and Amount of Claim

Policy Benefit	Amount Claimed	Policy Benefit	Amount Claimed
Cancellation or Curtailment	<input type="text"/>	Loss of Passport	<input type="text"/>
Medical Expenses	<input type="text"/>	Hijack	<input type="text"/>
Hospital Benefit	<input type="text"/>	<b>Additional Options</b>	
Mugging Benefit	<input type="text"/>	Ski Equipment	<input type="text"/>
Personal Accident	<input type="text"/>	Ski Hire	<input type="text"/>
Personal Belongings	<input type="text"/>	Ski Pack	<input type="text"/>
Personal Money	<input type="text"/>	Piste Closure	<input type="text"/>
Personal Public Liability	<input type="text"/>	Other	<input type="text"/>
Travel Delay	<input type="text"/>	<b>Total Amount Claimed</b>	<input type="text"/>
Missed Departure	<input type="text"/>	<b>Important Note: Some of these benefits may not be available depending on the policy you hold.</b>	
Legal Expenses	<input type="text"/>		

## How we use your information

Information which you supply to us, including sensitive information relating to health or medical condition, may be used in a number of ways, for example:

- to assess and process your claim
- to prevent crime (including fraud and money laundering)
- for audit, record keeping, statistical analysis and optional customer satisfaction surveys
- to comply with any legal requirement on us or other companies in our group
- to make decisions about you and other people when selling insurance

We may share information with our contractors (including service providers), agents and other international group companies for these purposes. Information may be put on a register of claims and shared with other companies, including insurers, for fraud prevention. We will share information with other third parties if required to do so by law.

We may transfer your information outside of the European Economic Area ("EEA") for the above purposes, including for secure electronic storage. Whenever we transfer or share information outside, or inside, the EEA we ensure that it is protected.

If you give information to us about another person, you will obtain that person's permission beforehand to provide the information and for us to use it as described above.

You can obtain further information by writing to our Data Protection Officer by e-mail to [DataProtectionOfficer@Chartisinsurance.com](mailto:DataProtectionOfficer@Chartisinsurance.com) or by post to Data Protection Officer, Chartis Insurance UK Limited, The Chartis Building, 58 Fenchurch Street, London EC3M 4AB.

## CLAIMS DECLARATION

- I / WE GIVE PERMISSION FOR MY / OUR PERSONAL INFORMATION TO BE USED AND SHARED IN THE WAYS DESCRIBED ABOVE.
- I / WE CONFIRM THAT I / WE WILL NOT PROVIDE ANY PERSONAL INFORMATION ABOUT ANOTHER PERSON WITHOUT THAT PERSON'S PERMISSION, AND THAT WHERE A CLAIM IS MADE ON BEHALF OF THAT PERSON, I / WE HAVE THEIR EXPLICIT AUTHORITY TO ACT AND RECEIVE ANY PAYMENT ON THEIR BEHALF.
- I / we declare that all the information given in respect of the claim(s) is to the best of my / our knowledge and belief, full, true and correct, and that no material information has been omitted which would affect the assessment of the claim(s) by the insurer(s).
- I / we understand that if I / we give information that is incorrect or incomplete you and / or the insurer(s) may take action against me / us, including court action.
- I / we know it is a CRIMINAL offence to defraud, or attempt to defraud an insurer and that by doing so I / we may be prosecuted.
- I / we give my / our authority to you to contact my / our household insurers, medical insurers, DSS or other insurers / third parties regarding a contribution.

**I / we have read and fully understand the declarations above (ALL persons claiming must sign below).**

Claimants Name	Claimants Signature	Date of Birth	Dated
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

# Ski Equipment, Ski Hire, Ski Pack and Piste Closure

Claim Ref:



## Documents You Need to Send Us - SEND ORIGINAL DOCUMENTS BUT PLEASE KEEP COPIES FOR YOUR RECORDS

1. Insurance policy schedule/certificate of insurance showing payment of your insurance premium.
2. Original evidence to substantiate travel. E.g. Booking invoice, travel itinerary and/or tickets.
3. A police report or report of a similar nature, if property was lost/stolen whilst it was not in the custody of a carrier.
4. If the claim is for property lost, stolen or damaged whilst in the custody of a carrier please forward a copy of their or their agents report, their written confirmation that no payment has been issued to you and all used travel tickets and baggage tags.
5. Damage claims only - please provide an estimate for repair or if the item is damaged beyond repair we require written confirmation of this from a relevant tradesman, please retain all damaged items as we may require them to be forwarded to our offices.

6. For all Ski Equipment Claims please provide pre-loss supporting documentation in the form of receipts or visa/bank statements showing the purchase of the items claimed for.
7. Ski hire claims - receipts for hire expenses incurred, if your claim is a result of a delay by a carrier please provide a copy of their report and their written confirmation of the date and time that you received your equipment.
8. Ski pack claims - written confirmation from the treating physician in resort that you were unfit to ski and evidence of the pre-paid expenses for which you are claiming e.g. your ski pass.
9. Piste closure claims - written confirmation from the resort or your tour rep of the circumstances giving rise to the claim and if an alternative site was available receipts for transport expenses incurred in travelling there.

**Important - please number all receipts for expenses incurred or pre-loss supporting documentation and put the number in the column headed 'Ref No.' when completing the sections below.**

**If you are unable to supply any of the documentation requested please provide a written explanation as to why.**

## Please Fully Complete The Sections Relating To Your Claim - BLOCK CAPITALS PLEASE

Are the expenses insured by any other policy you have? (e.g) Ski pass or mountain rescue cover, credit card company or Household insurance etc. (This will not affect any no claims discount on that policy)

YES	NO
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If YES, details of other insurance company, name and contact No.

Policy No

### **Ski Equipment Claims** Please provide details of the lost, stolen, damaged or destroyed ski equipment.

Description of Item	Owner	Place of Purchase	Date Acquired	Purchase Method	Purchase Price

### **Ski Hire Claims** If ski equipment was hired due to your own equipment being lost, damaged or delayed please provide details.

From whom was the equipment hired.

Date, from.  /  /

Date, to.  /  /

Cost.

Currency.

### **Ski Pack Claims** If you lost your ski pack (ski school fees, ski hire, lift pass) please provide details below.

Please provide details of the circumstances giving rise to this claim.

	Ski School Fees	Ski Hire	Lift Pass
Cost	<input type="text"/>	<input type="text"/>	<input type="text"/>
Start Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
End Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Date of Loss	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Number of Days Lost	<input type="text"/>	<input type="text"/>	<input type="text"/>

### **Piste Closure Claims** If you were unable to ski due to the piste at your pre-booked resort being closed due to lack of snow or adverse weather conditions please provide details below.

Date and time the piste was closed.  /  /

Date and time the piste was re-opened.  /  /

Description of Expense.

Date Incurred.

Cost

Currency

Cost of transport to an alternative site. If no expenses were incurred or an alternative site was not available please state.

  


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