

Claim Form (B) July 2007

1. Rental Car Insurance Excess
2. Luggage, Travel Documents or Money
3. Delayed Luggage Allowance

Claim Form (A) is for all other sections of the policy.

- Please ensure you provide all requested information and documentation. If you need help with your claim please telephone us. If you don't provide what is required your claim may be delayed or not paid.

- Please keep a copy of your claim.
- We shall respond to your claim within ten business days from the day we receive it.

COMPLETE THIS SECTION FOR ALL CLAIMS

YOUR DETAILS

Please tick preferred option for correspondence

Email Post

Title Given name/s

Family name

Occupation

Email address

Postal address

Suburb/ City

Postcode Home phone

Mobile Work phone

Policy number Name of travel agency

A copy of your Certificate of Insurance must be attached Attached

Date departed Date returned

Have you ever made a Travel Insurance claim in the past? Yes No

If yes, please give details (including name of insurer)

Certain credit cards may provide basic travel insurance cover which may also cover your loss. Do you have credit card/s? Yes No

If yes, please state:

Provider Type

Did you purchase your travel on the card/s? Yes No

WARNING

To avoid passing the costs of dishonest and fraudulent claims on to you, our honest policyholder, we are strongly committed to investigating claims. We try to conduct/finalise investigations quickly and with minimal disruption. All cases of fraud will be reported to the Police and can result in imprisonment.

BANK DETAILS

If your claim is approved and cash settlement made we will deposit the amount payable directly to an account you nominate (we cannot deposit into a credit card account). Please provide account details below.

Bank/Branch No. Account No.

Suffix

YOUR DECLARATION

I declare that all information contained on this claim form is/will be true and correct. I acknowledge that my personal information may be disclosed to, and obtained from, certain other parties as detailed in your policy brochure.

Signature of Policyholder

Date

FROM THIS POINT FORWARD – ONLY COMPLETE THE SECTION/S RELEVANT TO YOUR CLAIM

1. RENTAL CAR INSURANCE EXCESS

Please ensure that you attach the following documents:

- Original Rental Agreement showing the excess you were liable to pay
- Copy of the itemised repair invoice showing the cost of repairs to the vehicle
- If another party was at fault, written confirmation from them of the compensation payable by them

Attached

Date of incident Time Country Location

Please advise how the accident/damage/theft occurred to your rental car?

Did the damage occur whilst driving on an unsealed surface? Yes No

Excess you were liable to pay

Repair costs

Amount you are claiming

2. LOSS, THEFT OR DAMAGE OF LUGGAGE, TRAVEL DOCUMENTS OR MONEY

Please ensure that you attach the following documents:

Attached

- Original (not photocopy) loss/theft/damage report e.g. Police report, hotel report, transport provider letter etc
- For items lost or stolen while in the custody of a transport provider: We require a letter from the transport provider advising the amount of compensation they are paying. *Travel insurance protects you against the amount the transport provider is unable to compensate you for, subject to your policy conditions and limits. You need to claim compensation from the transport provider in the first instance before submitting your claim to us*
- Electrical items e.g. cameras, computers, mobile phones, iPod's, MP3 players, etc., we require the original receipts (not photocopy). If you no longer have the original receipt please obtain a duplicate from the place of purchase
- Other Items: Original (not photocopy) purchase receipts (or duplicates from the place of purchase) are best. Other documents you may submit for consideration are warranty cards, instruction manuals, credit card/bank statements, photographs or packaging
- Damaged Items: Obtain from a repairer (of your choice) a quote stating the repair cost or a letter stating that the item is damaged beyond economic repair
- Copies of receipts for replacement items if you have replaced the items which were lost, stolen or damaged

Date of incident	Time	Country	Location
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> AM/PM	<input type="text"/>	<input type="text"/>

Please advise how the loss/theft/damage occurred. If the incident occurred while the goods were with you, please detail where the goods were placed in relation to your person at the time. Please attach a letter if more space required.

Were the Police or a responsible authority notified? Yes No Report Reference Number

If No, please explain why this policy requirement was not met:

Do you have household contents insurance? Yes No If yes, can you claim from them for this event? Yes No

Name of insurer

If yes, please include evidence of the amount received

Full Description of each item Must include brand, model number etc	Original purchase price and currency	Month and year of purchase	Store name and suburb where purchased	Proof of ownership attached?	Have you replaced this item?
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	Yes / No	Yes / No
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	Yes / No	Yes / No
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	Yes / No	Yes / No
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	Yes / No	Yes / No
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<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	Yes / No	Yes / No

Please attach a list if more space required

3. DELAYED LUGGAGE ALLOWANCE

Please ensure that you attach the following documents:

Attached

- Original (not photocopy) loss report from the transport provider with confirmation that all of your luggage was delayed, the length of time your total luggage was delayed and details of compensation paid by them
- Original (not photocopy), itemised receipts for essential, emergency purchases of clothing & toiletries (made whilst your luggage was delayed)

When did your flight arrive?

When did you receive your luggage back?

Date Time AM/PM

Date Time AM/PM

For the traveller(s) affected:	Description of items purchased	Price and currency	Description of items purchased	Price and currency
How many bags did you check in? <input type="text"/>	1. <input type="text"/>	<input type="text"/>	4. <input type="text"/>	<input type="text"/>
How many of these bags were delayed? <input type="text"/>	2. <input type="text"/>	<input type="text"/>	5. <input type="text"/>	<input type="text"/>
	3. <input type="text"/>	<input type="text"/>	6. <input type="text"/>	<input type="text"/>

Please attach a list if more space required