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Covering Risk. Improving Lives.

PERSONAL PROPERTY / MONEY AND DOCUMENTS CLAIM FORM

(Please complete this form and return it with all relevant documentation. Filling this form is not an admission of liability.)

1. Claim Reference

- **Claim Reference:** .....

2. Personal Details

- **Name:** .....
- **Date of Birth:** .....
- **Occupation:** .....
- **Telephone:** .....
- **Hours of Contact (at above number):** .....

3. Insurance Details

- **Policy Name:** .....
- **Date Trip Originally Booked:** .....
- **Travel Dates:** From ___ / ___ / ___ To ___ / ___ / ___
- **Travel Agent (if any):** .....
- **Tour Operator (if any):** .....
- **Hotel Accommodation Details:** .....
- **Resort/Country:** .....

4. Loss / Damage Information

- **Date of Loss/Damage:** .....
- **Full Details / Circumstances:** .....
- **Reported to Police?** Yes / No
    - If No, reason: .....
- **Reported to Airline?** Yes / No
    - If No, reason: .....
- **Reported to Tour Operator?** Yes / No
- **Covered under Household Contents Insurance?** Yes / No
    - If Yes, give details: .....
- **Covered under other relevant policy (e.g., Barclaycard)?** Yes / No
- **Previous Insurance Claim for Personal Property/Money?** Yes / No
    - If Yes, give details: .....

5. Items Lost / Damaged

Item Description	Date of Purchase	Shop & Town	Purchase Price	Amount Claimed	Evidence of Value

(Continue on a separate sheet if necessary. Mark all documents with your claim reference.)

6. Settlement

- **State to whom settlement should be paid:**
  .....
  .....

7. Required Documents

Please enclose the following originals:

1. Holiday/flight confirmation or deposit receipt – Yes / No
2. Certificate of Insurance – Yes / No
3. Travel tickets – Yes / No
4. Police, Airline or Tour Operator report – Yes / No
5. Evidence of ownership (receipts, valuations, credit card receipts) – Yes / No
6. Any other relevant documentation – Yes / No

Declaration and Data Collection Consent

Data Collection Consent: I consent to the collection, verification, processing, storage and lawful use of my personal data for identification, regulatory compliance, and the provision of insurance services

I declare that to the best of my knowledge all particulars contained in this form are true and correct.

- **Signed:** .....
- **Date:** .....