

Willow House, Pine Trees, Chertsey Lane, Staines, Middlesex TW18 3DZ, United Kingdom.

Telephone: +44 (0) 1784 410910 Fax: +44 (0) 1784 891031 Email: btravclaims@bupa.com

The customer service helpline is open 8.30 am - 6 pm, Monday to Friday and 9 am - 1 pm, Saturdays and UK public holidays. Bupa Travel Claims are open 9 am - 5 pm, Monday to Friday. Calls may be recorded and may be monitored.

Address

Important

Please keep a separate note of this claim reference number and quote it whenever you contact us. (If downloaded from our website, the claim reference number will be allocated when your claim form is received by us).

Claim reference:

Date

Dear

Personal effects, baggage and money claim form

Thank you for requesting a claim form. Please ensure that you complete it fully and return it to us within 28 days of the end of your trip. Page 4 of this claims form includes a declaration which you are required to read and sign. Failure to do so may cause delays in the processing of your claim.

Please check that we have correctly stated your name, initial(s), address and post code and amend if necessary.

The section below details the documents which we need to deal with your claim and some notes which we would ask you to read carefully when completing the form.

Very important

Please ensure you enclose the following **original** (not photocopied) documents (if not already sent).

- | | |
|---|--|
| a) For damaged items, including suitcases, please obtain a repairers estimate or confirmation of damage beyond repair. | Yes <input type="radio"/> No <input type="radio"/> |
| b) Evidence of trip, such as the holiday booking invoice or original travel tickets. Please note this must include evidence of travel to and from your country of residence. | Yes <input type="radio"/> No <input type="radio"/> |
| c) Receipts or other evidence of value for the items on the claim form. Estimates for replacement are not acceptable, however, we will accept a supplier's certified copy of an original receipt. | Yes <input type="radio"/> No <input type="radio"/> |
| d) The police, airline or other relevant reports. | Yes <input type="radio"/> No <input type="radio"/> |
| e) Currency transaction slips or bank statements for money losses. | Yes <input type="radio"/> No <input type="radio"/> |
| f) Flight tickets and baggage tags, if applicable. | Yes <input type="radio"/> No <input type="radio"/> |
| g) Baggage delay claims - written confirmation from the carrier confirming the period of the loss of your luggage. | Yes <input type="radio"/> No <input type="radio"/> |

Claim form notes

- Loss or damage caused by a carrier (i.e. airline, coach operator, ferry company etc.) should have been reported to them within 24 hours of discovery and a Property Irregularity Report (PIR)/incident report obtained. If you have not reported such loss or damage, please do so immediately or at the latest within seven days of the incident. Please enclose the original report with the ticket(s) and baggage tag(s).
- Losses or thefts should have been reported to the police within 24 hours. Please enclose their ORIGINAL report.
- The information requested about other insurance policies you may hold is quite routine and will help us process the claim for you. If you are a single person living with your parents, please give details of their insurers. We would ask you to check for any insurance which may be in force on any of the items for which you are claiming including sports equipments and valuables.

Fast track claims

If you have no objection, in an effort to promote speedier and more customer friendly claims handling, we may find it easier to telephone and/or email you during the course of our normal working hours to discuss your claim and/or request further details.

If you do not wish to be contacted by either of these methods then please tick this box

Block capitals must be used please

1. Claimant's title: MR/MRS/MISS/MS/DR/OTHER (please circle)
 Forenames: _____
 Surname: _____

2. Address:

 Post Code: _____
 Country: _____

3. Contact
 Daytime no.: _____
 Mobile no.: _____
 Email: _____

4. Occupation: _____ Date of birth: _____

5. The destination and country of this trip:

6. a) The schedule or member number:

 b) For business schemes, please advise us of the following.
 The company name: _____
 Name of the employee: _____
 Relationship to claimant (if different): _____

7. The period of your trip giving total number of days:
 From: _____ To: _____
 Total no. of days: _____

8. The date on which your trip was first booked
 Day: _____ Month: _____ Year: _____
 Purpose of trip: Business Leisure
 (Please tick as appropriate)

9. Please advise the exact circumstances of how the loss, theft, damage or destruction occurred: (continue on a separate page if necessary)
 Date: _____ Time: _____ Place: _____

10. To whom was this incident reported?
 Please submit report:

11. Have you received any payment from your resort representative, airline or other source? Yes No
 If yes, please advise:

 Amount _____

12. For baggage delay claims.
 Please confirm the approximate length of time you were without your baggage: _____

13. **Failure to provide this information could delay your claim**
 Have you ever made any previous personal property, money losses, theft or damage claims? Yes No
 If yes, please supply the following information:
 Date: _____ Incident: _____ Insurer: _____ Reference: _____
 Date: _____ Incident: _____ Insurer: _____ Reference: _____

14. **Failure to provide this information could delay your claim**
 a) Certain household contents insurance policies provide Travel Insurance. Do you have a household contents insurance policy or if you are living with your parents do they have a policy? Yes No
 If yes please supply the name and address of the insurance company and policy number:
 Name: _____
 Branch Address: _____
 Policy number: _____

b) Do you have any other insurance which may cover the items claimed? Yes No
 If yes, please supply details of the policy(ies): _____

c) Was a credit card used to pay all or part of the trip cost? Yes No
 If yes, please supply the following information:
 Name of card: _____ Cardholders name: _____
 Name of card issuer (if different): _____
 Credit Card No:

