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

Delay and missed departure 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) 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 No

b) Delay claims - a letter from the carrier or tour operator(not the travel agent) stating:

Yes No

1) The official cause of the delay

2) The exact period of delay
(both are essential please).

c) Missed departure claims -

1) a letter from either the public transport service giving reason for and period of delay or confirmation from a vehicle recovery company to confirm breakdown.

Yes No

2) substantiation of the outlays made

Yes No

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. The date and time you were first aware of the reason leading to the delay:

Date: _____ Time: _____

10. Details of scheduled departure:

Date: _____ Time: _____ Place: _____

11. Details of actual departure:

Date: _____ Time: _____ Place: _____

12. The total number of hours/minutes you were delayed:

Hours: _____ Minutes: _____

13. What was the reason given for the cause of delay?

14. What was your method of travel? (i.e. aircraft, ship etc.)
