

You must register any claim within 30 days after completion of your travel. You need to supply to us original documents of the evidence you intend to rely upon in your claim, by registered post to ensure delivery.

Claimant Details			Claim Reference (if known)
Title (Mr/Mrs etc)	Surname	Forename(s)	Date of Birth / /
Nationality		Occupation	
Medicare Number	Parent/Guardian's Medicare Number (If medical claim is for a minor)		
Home Address		Home Phone	
		Work Phone	
		Mobile	
State	Postcode	Email	

Policy Details			
Policy Number	Date Issued / /	Number in Party	
Independent Travel Arrangements: Yes <input type="checkbox"/> No <input type="checkbox"/>	If no, provide the following *:		
*Travel Agent & Branch	*Tour Operator		
Date of Booking / /	Departure Date / /	Return Date / /	Total Days
Country	Resort/Town		

It is against the law to submit a fraudulent insurance claim. If your claim is found to be fraudulent the claim will be declined and Insurers will pursue recovery by the use of legal action.

- I/We hereby declare that all information, answers, and documents given in connection with this claim are true and correct to the best of my/our knowledge and belief. I/We have not omitted any material information, which would affect the Underwriters judgment of the claim. I confirm that where a claim or claims are made on behalf of others, I have their full authority to act on their behalf, and I confirm that I understand that neither Mapfre Insurance Services Australia Pty Ltd nor the underwriters will accept responsibility if any payments are not distributed proportionately to the persons concerned.
- I/We understand that the information on this form will be passed to or used by Mapfre Insurance Services Australia Pty Ltd for my insurance, this includes underwriting, processing, handling claims and preventing fraud and could include passing details to agents or other Insurers. This includes access to my previous claims with other insurers.
- I/We subrogate all rights of recovery to Mapfre Insurance Services Australia Pty Ltd and also consent to them seeking reimbursement of any medical expenses paid by them.

For medical related claims:

- I authorise any doctor, hospital, general or travel insurer or other organisation or person having any records or information concerning my medical history or treatment to furnish such records or information as may be requested by Mapfre Insurance Services Australia Pty Ltd or their agents. I understand that in executing this authorisation, I waive the right for such information/records to be privileged. I am also aware that such information/records are relevant in the evaluation of my claim and that non-submission could prejudice my claim. A photocopy of this authorisation shall be considered as effective and valid as the original.

I have read and fully understand the declarations above (ALL persons claiming must sign)

Claimant's Name	Signature	Date of Birth / /	Date / /
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Baggage Delay Claims Only

Arrival in resort: Date / / Time ^{AM}/_{PM} Luggage received: Date / / Time ^{AM}/_{PM}

How long was your luggage delayed Has compensation been received from the carrier: Yes No
(If yes, please provide documentary evidence of this)

Flight Number Flight Date / / PIR or Airline Reference Number

Loss, Theft or Damage Claims Only

Where and when did the loss, theft or damage occur

Loss, theft or damage discovered:
 Date / / Time ^{AM}/_{PM} Place of Incident (country, resort, town)

Was the incident reported to the:
 Police: Date / / Time ^{AM}/_{PM} Reference number

Carrier eg. Airline: Date / / Time ^{AM}/_{PM} Reference number

Detail below the full circumstances surrounding the incident and the precautions taken to protect your property

Where were the items at the time of the loss, theft or damage

Loss and theft claims only: What action did you take to attempt to recover your property? Was the incident reported to any other authority, eg. your holiday rep, rental car company or hotel etc? Please provide full details and a copy of their report if obtained

Have you or anyone else claiming made any previous claims for personal effects or money: Yes No *If yes, please give full details below:*

Do you/your family or anyone else claiming have any other insurance which may cover this loss, eg. travel insurance with your bank/credit card account, tour operator/travel agent or household insurer etc:
 Yes No

Insurer Name and Address

Policy/Account No Name of Policy Holder

Has a claim been submitted to any other party, eg. other insurer, airline or carrier etc: Yes No
If yes, give details and claim reference number

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

1. Original evidence to show your dates of outward and return travel, (booking invoice, travel tickets, itinerary etc.)
2. A police report, if property was lost or stolen other than whilst in the custody of a carrier.
3. If the claim is for property lost, stolen or damaged whilst in the custody of a carrier, please forward the report issued by the carrier or their agent, written confirmation from the carrier that no payment has been issued to you and all used travel tickets and baggage tags.
4. For all personal possession claims, please provide pre-loss supporting documentation in the form of receipts or visa/bank statements showing the purchase of the items claimed for. Please also forward the manuals and guarantee documentation for any watches, cameras or other electrical or electronic goods.
5. **Damage claims only** - please provide an estimate for repair. If the item is damaged beyond repair we require written confirmation from a relevant tradesman. Please retain all damaged items as we may require them to be forwarded to our offices.
6. **Cash claims only** - we require pre-loss supporting documentation in the form of Bank or Building Society statements, currency exchange slips etc.
7. **Baggage delay claims only** - receipts for necessary purchases of clothing and toiletries and the carriers confirmation of the incident and the date and time your luggage arrived.
8. **Loss of passport/travel document claims only** - receipts for travel, accommodation and communication expenses to obtain a replacement passport or travel document. Please ensure you advise the expiry date of the lost/stolen passport overleaf.

Details of damaged, stolen, destroyed or lost Personal Baggage (continue on a separate sheet at the end of the form if necessary)

Please provide full details of each item claimed for. For cameras give make and model number, lens details etc. For watches give make, model, nature and quality of metal from which the case was made, type of strap, number of jewels etc. For jewellery give nature and quality of the metal content, size and type of stones etc. Purchase receipts and valuations must be provided wherever possible.

Ref	Description of item	Owner	Where purchased	Date acquired	Purchase method (card, cash etc)	Purchase price	Office use only
Total Claimed							

Please indicate if you took out the E2 Additional specified items cover for the items you have listed above:

Yes No

Please indicate whether any of the items are specifically insured elsewhere (if so please indicate which items):

Yes No

Details of damaged, stolen, destroyed or lost money. Currency exchange slips or bank statements showing the withdrawal of the cash claimed must be provided. (continue on a separate sheet at the end of the form if necessary)

Ref	Owner	Travellers Cheques	Total Cash A\$	Foreign Currency	Cash A\$	Foreign Currency	Office use only
Total Claimed							

Loss of passport/travel documents claims only - detail the expenses you incurred in obtaining a replacement passport or travel document (continue on a separate sheet at the end of the form if necessary)

Ref	Owner	Travellers Cheques	Total Cash A\$	Foreign Currency	Cash A\$	Foreign Currency	Office use only
Total Claimed							

Baggage delay claims only (continue on a separate sheet at the end of the form if necessary)

Ref	Owner	Travellers Cheques	Total Cash A\$	Foreign Currency	Cash A\$	Foreign Currency	Office use only
Total Claimed							

IMPORTANT NOTE: THIS POLICY IS AN INDEMNITY POLICY WHICH WILL RESTORE THE SITUATION TO WHAT IT WAS AT THE TIME OF LOSS. This means settlement is calculated at the value at time of loss, after deduction for age, wear, tear and depreciation

