

Corporate Travel Insurance

Claim form for baggage etc.

Policy No.

Claim No.

The claim is regarding (please tick off the box)			
Baggage delay Theft	Damaged items Lost baggage	Delayed flights/cancellation of flights Missed departure	Legal aid/Personal liability
Name of your firm		What is your job title?	
Name of Contact Person (firm)		Email of Contact Person (firm)	
First name(s), surname			Date of birth
Address		Postal code	City
Email	Phone: Mobile	Home	Work
Local insurance details			
This information is a condition for handling your claim			
Please state the name of your local insurance policy			
Please state the policy number of your local insurance policy			
Is your claim reported to your local insurance policy?			Yes No
Please state the amount reimbursed by your local insurance policy			
Travel details			
Date of departure	Date of return	Destination (city and country)	
What was the purpose of your journey?		Airline company/travel agent	
What happened?			
Where and when did the incident occur? Date		Time	Location (city and country)
Description of what happened – as detailed as possible (please enclose further description)			
Police report etc.			
Has the claim been reported to the police/hotel manager/airline company etc.? (please enclose original report)			
Yes	No	If no, why not?	
Witnesses			
Were there any witnesses to the incident?			
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Contact info	
Please fill out, if your baggage was delayed			
When did you arrive at your destination?		Time	Date
When was your baggage delivered to you?		Time	Date
Receipts for your replacement purchases, the confirmation issued by the airline (P.I.R.) and ticket (s) or itinerary must be enclosed along with your claim form. In the event of baggage delay upon arrival to your country of residence, please enclose documentation, i.e. receipts, P.I.R (Property Irregularity Report), itinerary, police reports etc.			

Please fill out, if your flight was delayed or cancelled

When was your flight supposed to depart? Time Date

When did you flight depart? Time Date

What was the reason for the delay/cancellation?

In the event of delayed or cancelled flights, receipts, itinerary and documentation from the airline confirming the delay/cancellation must be enclosed along with your claim form.

Please fill out, if you missed your departure

When did you arrive at the airport? Time Date

When did your flight depart? Time Date

What was the reason for the delay?

In the event of missed departure, unused tickets, receipts, itinerary and documentation from the airline confirming the delay/cancellation must be enclosed along with your claim form.

Please fill out, if your claim is regarding theft/burglary

In case of theft, please describe the nature and, if possible, physical signs of theft:

Was the room/place of storage/car locked? Yes No If yes, are there any visible signs of forced entry? Yes No

Describe the signs

In case of burglary on car, please state car brand

Alarm centre

Has Europæiske ERV's alarm centre been notified about the claim? Yes No If yes, case No.

Has Europæiske ERV's service office (Euro-Center) been notified about the claim? Yes No If yes, case No.

Compensation

Documentation stating price and date of purchase must be enclosed for all items. For claims regarding baggage delay, receipts for replacement purchases must be enclosed.

Description of items

If necessary, please enclose a separate list

Description of items	Purchase		Amount claimed (state currency)
	Price	Date	

Signature etc.

I hereby declare that the given information is true. I am aware that Europæiske ERV's coverage can be reduced or waived according to law, if I state untrue information. I hereby give my consent to Europæiske ERV to collect, use and keep my personal information and to disclose this information to police, public authorities, insurance companies, airlines, The Insurance Complaints Board etc. The consent/power of attorney only covers this claim.

Remember that you, at any time, can withdraw your consent by contacting Europæiske ERV and stop any future use of your consent. Read more about your rights on our website at www.erv.dk under "Data Protection Policy".

Please note, that withdrawing your consent may influence our capability to process your application and that we are bound by rules and legislation regarding storing and filing of your data from the time you conclude a valid insurance contract with us.

Insured's signature

Date

Signed and stamped on behalf of the firm

[Signature box]

Date