

# Baggage, Personal Effects and Money claim form



Please complete all relevant sections of this Claim Form and return to:

**PJ Hayman Claims Department, Stansted House, Rowlands Castle, Hampshire, PO9 6DX.**

Claim Number

(for office use only)

Please use BLOCK CAPITALS when filling in your form. If there is insufficient space for your answers please use a separate sheet.

## Check List of Required Documents - for all claims

Please send **Originals** (you should retain copies for your records).

If you do not enclose all the documentation we have listed any settlement of your claim may be delayed.

Tick  against documentation enclosed.

Insurance Schedule (if you have an Annual Insurance a copy would be sufficient).

Holiday Booking invoice showing the date the holiday/trip was booked, who was booked to travel, travel dates, destination, amounts paid and purchase of your travel insurance (if applicable).

## For all claims

The original receipts/proof of pre-loss purchase for the items you are claiming for, in the event you are claiming for delayed luggage please forward all the original receipts for the emergency purchases (we are unable to return the receipts for the emergency purchases).

## Claims for damaged items

Written confirmation from a trade's person to confirm the cost to repair the item or to confirm the item is beyond economical repair.

## Claims where an airline/carrier is involved

Incident report to confirm the loss/damage or delay has been reported to the carrier (as required) in the event the incident involves an airline this document is a Property irregularity report or PIR (we are unable to return this document).

Baggage delivery report/proof of delivery which will confirm the length of delay to your baggage (we are unable to return this document).

Baggage tags and tickets.

## If your baggage has been irretrievably lost by the airline please forward

Written confirmation from the Airline to confirm the baggage has been irretrievably lost

Written confirmation from the Airline to confirm the amount of compensation due to you from them as a result of the loss of your baggage

## If you have suffered a theft or lost items during your trip please forward

The original police report to confirm you have reported the loss (as required)

The local tour operator's representatives report into the incident (where available)

Proof of pre-loss drawings/currency exchange for the money you are claiming for

**Originals** - Please note that photocopies are not acceptable by Insurers when processing your claim we must have the original documents. Some original documentation can be returned, if requested.

Claimant Name:  Claimant Age:

Name of Person handling the claim: (if different to above)

Address for Correspondence:

Postcode:  Tel No:

**Planned Travel Dates:** Outward Journey Date:  Return Journey Date:

Country  Destination

Name of Travel Insurance: (e.g. Travel Plus)

Travel Insurance Policy Number:  Date Insurance Purchased:

## Previous Insurance Losses:

Have you had any previous insurance losses in the past 5 years (e.g. household, travel, motor)?

If **yes**, please provide details of the loss, together with the name of the insurance company and the claim number

## Household Insurance Policy:

Name of Insurer:  Address

Policy Number:

**Details of circumstances of the loss**

Indicate if items are lost/damaged/ stolen (please delete as necessary)

Date of incident

Time of incident

Please describe fully how you believe the loss/damage occurred:

Was the property left unattended? If so, please confirm why and for how long.

(Please attach a diagram where necessary)

Who was responsible for the property at the time of the loss?

If the theft was from your trip accommodation please confirm the details of the incident

Was a safe available?  YES  NO

Was a safe used?  YES  NO

Who had access to the trip accommodation?

**Property last seen**

Place

Date

Time

**Property discovered missing/lost or stolen**

Place

Date

Time

**If theft from a vehicle was it?**

Own Vehicle  Hired Vehicle Make

Model  Registration Number

**Where in the car had the items been placed?**

**Please supply Vehicle Damage Report to show vehicle broken into**

Name of Vehicle Insurer

Address of Vehicle Insurer

Policy Number



