

Business Travel Insurance

Claim form for baggage etc.

Policy No.:

Claim No.:

The claim is regarding (please tick off the box)			
Baggage delay	Damaged items	Delayed flights/cancellation of flights	Legal aid/Personal liability
Theft	Lost baggage	Missed departure	
Name of your company:		Your position/title?	
First name(s), surname:			Date of birth:
Address:		Postal code:	City:
Email:	Phone No. daytime:	Phone No. eveningtime:	
Credit card and insurance details			
This information is necessary in order to handle your claim			
What kind of credit card do you have (e.g. MasterCard, Eurocard, Globecard)?			
Is the credit card issued by a bank? Yes No If yes, which bank?			
Card No.:		Did you pay for the trip with your/a credit card? Yes No	
Did you submit your claim to the credit card issuer? Yes No		I do not have a credit card	
Other insurance			
In which insurance company have you taken out your household insurance?			
Company:		Policy No.:	
Did you submit your claim to the insurance company? Yes No			
Travel details			
Date of departure:	Date of return:	Destination (city and country):	
What was the purpose of your trip?			Airline/travel agent:
What happened?			
Where and when did the incident occur? Date: Time: Location (city and country):			
Description of the incident – as detailed as possible (please enclose further description if necessary):			
Police report etc.			
Has the incident been reported to the police/hotel management/airline etc.? (please enclose report)			
Yes No If no, why?			
Witnesses			
Did anyone witness the incident? Yes No			
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 ERGO Forsikring's alarm centre been notified about the claim?	Yes	No	If yes, case No.:
Has ERGO Forsikring'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	Purchase		Amount claimed (state currency)
If necessary, please enclose a separate list	Price	Date	
Ownership			
Do the items belong to:	You?	Yes	No
	Your company?	Yes	No
Method of payment			
The compensation should be reimbursed to:	Your company	You	
Bank reg. No. and account No.:			
IBAN No.:		Swift code:	
Name and address of the bank:			
Signature etc.			
I hereby declare that the given information is true. I am aware that ERGO Forsikring's coverage can be reduced or waived according to law, if I state untrue information. I hereby give my consent to ERGO Forsikring 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 ERGO Forsikring 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 company

Date