



TRAVEL INSURANCE CLAIM FORM FOR RETAIL POLICIES

IMPORTANT - BEFORE YOU START:

- 1 For all claims please complete **Sections 1 and 9** and any other section(s) relevant to your claim.
- 2 Please print your details clearly in **CAPITAL** letters using a pen.
- 3 Please go through the checklist in **Section 10** to ensure you've provided all the documents we need. This will help us to assess your claim as quickly as possible.

SECTION 1:

TRAVELLER DETAILS

Please complete this section for ALL claims.

Policy Number Name of Policy Owner

Name(s) of Traveller(s)	Date(s) of Birth	Occupation(s)
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	

Phone numbers: Home/Work () Mobile ()

Email

Home Address

Reason for Travel Leisure Business Other

Total number days of travel From / / To / /

Journey destinations Type of ticket held before NZ departure One way Return

Other Insurance Information *(Please note that some credit cards may provide travel insurance cover):*

Have you purchased other insurance for any part of your journey? Yes No If yes, please specify the insurance provider

Do you hold a Gold or Platinum credit card with another provider? Yes No

Name on Credit Card

Name of issuer

Card type: Gold Platinum Airpoints Gold Airpoints Platinum Other *(please specify)*

Did you use this credit card to pay for any travel expenses? Yes No

SECTION 2:

CANCELLATION OR ALTERATION OF TRAVEL

If your claim is due to cancellation or alteration of travel due to an event in NZ or overseas, please complete this section.

Reason for cancelling or altering the travel

Date of incident

Date bookings were cancelled/altered

Who advised you not to travel?

For alterations, what was/is the date and time of the actual departure?

If the travel plans were changed due to medical reasons, please complete this box

Name of person affecting the travel

What is their relationship to you?

What is their date of birth?

Where do they live?

Please provide details of the injury or illness

Date of accident, or date illness started

Has this person ever suffered from this or a similar condition before?

Yes

No

If yes, please explain

(If you also incurred overseas medical expenses, please complete Section 4.)

Cancellation/Alteration of Travel Expenses List:

	Amount paid (NZ)	Date Paid	Amount refunded (NZ)
Flight costs			
Accommodation costs			
Tour costs			
Other costs			
Other costs			
Other costs			
Other costs			
Total			

Additional notes

SECTION 3:

TRAVEL DELAY

If your scheduled transport was delayed during your journey, please complete this section.

Cause of the delay

Where did this occur? (city & country)

Date & time of original scheduled departure

Date & time of actual departure

Total length of delay

Travel Delay Expenses List:

	Amount paid (NZ)	Date Paid
Additional accommodation		
Additional travel		
Additional food		
Missed pre-paid arrangements		
Total		

SECTION 4:

OVERSEAS MEDICAL & DENTAL EXPENSES

If you suffered an injury or illness overseas or required emergency dental treatment during the journey, please complete this section.

Who suffered the injury/illness? Date of birth / /

Relationship to policyholder Date of accident, or date illness started / /

Where were they when they required medical treatment? (city & country)

Details of the injury/illness

Date of first medical or dental consultation / / Name of treating doctor/dentist

Name of clinic/hospital Date of hospital admission (if relevant) / / Date of hospital discharge (if relevant) / /

What treatment was received?

Was our emergency assistance provider contacted? Yes No

Has this person ever suffered from this or a similar illness/injury before? Yes No

Please provide details

What is the name and address of their family doctor?

Has this person lodged a claim with ACC for this incident? Yes No Does this person have health insurance? Yes No

If yes, please specify the insurance provider

Medical & Dental Expenses List:

Name of medical provider	Type of medical expense	Date Paid	Amount (local currency)	Amount (NZ)	Paid in full?

Additional notes

(If you also had to alter your travel, please ensure you have completed Section 2.)

SECTION 5:

LOSS OR THEFT OF CASH

If your cash was lost or stolen during your journey, please complete this section.

Please give full details of the loss/theft

Date of loss/theft / / Amount lost/stolen local currency NZD

Where did the loss/theft occur? (city & country) Was the loss or theft reported? Yes No

If yes, who did you report the loss or theft to? Date reported / /

If no, please explain the reason

SECTION 7:

PERSONAL LIABILITY

If during your journey you become legally liable to pay damages and compensation for bodily injury or loss of/damage to property, please complete this section.

Please provide full details of the incident

Date of incident

 / /

Location of incident (city & country)

Who is claiming liability against you?

What are their contact details?

(Postal or email address, phone number etc.)

What is your relationship to them?

Did you admit liability?

Yes

No

Please explain the reason for this

What is the cost of the liability?

(Please include the currency used)

SECTION 8:

RENTAL VEHICLE COLLISION DAMAGE AND THEFT EXCESS COVER

If you had to pay an excess or deductible due to damage to or theft of a vehicle you rented overseas, please complete this section.

Please give full details of the incident

Date of incident

 / /

Location of incident (city & country)

For damage, please describe the damage to the vehicle

Was the incident reported to the Police?

Yes

No

If yes, please provide a copy of the police report or reference number

If no, please explain the reason you did not report the incident

What is the name of the rental company?

What are their contact details?

(Postal or email address, phone number etc.)

Rental Vehicle Excess List:

	Amount paid in NZ\$	Date Paid	Amount Refunded in NZ\$
Excess paid to rental company			
Towing/Vehicle return costs			
Other costs			

Please note: We reserve the right to request further documents as required to support your claim.

Documents required for all claims

- The completed Travel Claim Form including sections for Traveller Details, Payment Details and signed Declaration.
- Your travel itinerary showing New Zealand departure and return dates.

Documents required for Cancellation of Travel claims

- Complete the Cancellation or changes to travel/Additional Expenses section of the Travel Claim Form.
- Provide evidence for the cause of the change to your travel plans.
- Provide evidence for costs incurred, e.g. invoices or credit card statements, and any refunds received.
- If your travel was booked through a travel agent, a letter from the agent detailing amounts paid and refunds received.
- If cancellation was due to medical reasons please provide completed Medical Attendants statement.
- If cancellation was due to death please provide a certified copy of the death certificate.

Documents required for Medical claims

- Complete the Medical and Dental section of the Travel Claim Form.
- Attach all Hospital and/or specialist Reports, including Hospital Discharge Summary.
- Include all Medical Bills and Receipts.
- Include statements from your private Health insurer and/or ACC details.

Documents required for Loss or Theft of Cash claims

- Complete the Loss or Theft of Cash section of the Travel Claim form.
- Provide evidence of the amount of cash lost/stolen and a copy of the police report.

Rental Vehicle Excess claims

- Complete the Rental Vehicle Excess section of the Travel Claim Form.
- Attach the Rental Vehicle agreement, and Car Accident report.
- Include evidence of any additional costs incurred.

Luggage and Personal Effects claims

- Complete the Luggage and Personal Effects section of the Travel Claim Form.
- Provide evidence that you reported the loss to the Authorities, e.g. police reports, airline report.
- Provide evidence of ownership, e.g. photos, receipts.
- Include evidence of purchase of the items.
- Include evidence of any compensation received.
- If damaged, include repairs estimate.

Baggage Delay claims

- Complete the Luggage and Personal Effects section of the Travel Claim Form.
- Attach the lost baggage report from the Airline (i.e. PIR).
- Include evidence of emergency items that you may have purchased.
- Include evidence of any compensation received from the Airline.

Flight Delay claims

- Complete the Cancellation or changes to travel/Additional Expenses section of the Travel Claim Form.
- Attach the delay report from the Airline (showing delay time and reasons), Air Tickets and Boarding Passes.
- Include evidence of any additional costs incurred by the delay.

Personal Liability claims

- Complete the Personal Liability section of the Travel Claim Form.
- Attach all correspondence with third parties that are making a claim against you.
- Include reports of police or other authorities, where a report has been made.