URICH®

Corporate Travel Insurance

Claim form

	Branch
	Policy No.
	Due date
	Broker/Agent
Claim No. (Office use only)	Address

Important information

- Do not admit liability Ask for any claim to be put in writing and refer all correspondence to ZURICH AUSTRALIAN INSURANCE LIMITED.
- Make sure you give us all the details about your claim. Attach a separate sheet if you have insufficient space on this form.
- Send all quotations you have received to repair or replace damaged property or invoices or receipts if the goods have already been repaired.

General Insurance Code or Practice

Zurich Australian Insurance Ltd is a signatory to the General Insurance Code of Practice. For more information about the General Insurance Code of Practice please go to www.zurich.com.au and select About Zurich.

Privacy

Zurich is bound by the Privacy Act 1988 (Cth). Before providing us with any Personal or Sensitive Information ('Information'), you should know that:

We collect, use, process and store Personal Information and, in some cases, Sensitive Information about you such as health information, in order to comply with our legal obligations, assess your application and, if your application is successful, to administer the products or services provided to you, to enhance customer service and product options and manage a claim ('purposes').

If you do not agree to provide us with the Information, we may not be able to process your application, administer your policy or assess your claims.

By providing us or your intermediary with your Information, you consent to our use of this Information and where relevant for the purposes, you consent to our disclosure of your Personal Information, including your Sensitive Information, to your intermediary, affiliates of the Zurich Insurance Group Ltd, other insurers and reinsurers, our service providers, our business partners, medical and health practitioners, government offices and agencies, regulators, law enforcement bodies, your employer, Workcover authorities and as required by law within Australia or overseas.

Zurich may obtain Information from government offices, the parties listed above and third parties to administer policies and assess a claim in the event of loss or damage.

In most cases, on request, we will give you access to personal information held about you. In some circumstances, we may charge a fee for giving this access, which will vary but will be based on the costs to locate the information and the form of access required.

For further information about Zurich's Privacy Policy, a list of service providers and business partners that we may disclose your Information to, a list of countries in which recipients of your Information are likely to be located, details of how you can access or correct the Information we hold about you or make a complaint, please refer to the Privacy link on our homepage – www.zurich.com.au, contact us by telephone on 132 687 or email us at Privacy.Officer@zurich.com.au

Personal details			
Name of insured (Company)			Policy number
Name of traveller			Mr Mrs Miss Ms
Occupation			Date of birth / /
Address			State Postcode
Telephone: Home ()	Business ()	Mobile
Email address			
Journey details			
Travel agent			
Date of booking travel arrangements	/ /		
Date of departure / /			Date of return / /
Did the loss occur whilst on authorised bus	iness travel?		Yes No

following details.		ent transferred directl					, pież	ise p	
Name of financial Institution									
Account name									
BSB number -		Account number							
Part B – Overseas Medi	ical Evnonsos								
	urred as a result of an – Injury O Sickness	<u> </u>							
Give full details									
Date of accident or commencer	ment of sickness / /	Date of first medi				/		 /	
Details of treatment by doctors	or nospital								
Dates in hospital – Admitted Have you ever suffered from the		Discharged Yes No		/	Т	ime) pı
Dates in hospital – Admitted Have you ever suffered from th	/ / Time am pm pm e same or similar complaint in the past?	Discharged	/	/	Т	ime) pi
Dates in hospital – Admitted Have you ever suffered from the If 'Yes', give details, dates, nam	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician	Discharged	/	/	Т	ime) pi
Dates in hospital – Admitted Have you ever suffered from the If 'Yes', give details, dates, name Name and address of usual fame	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician	O Discharged Yes No No	/	/	Т	ime) pi
Dates in hospital – Admitted Have you ever suffered from the If 'Yes', give details, dates, name Name and address of usual fame List the country and currency of	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician illy doctor	Oischarged Yes No O	/			ime) pi
Dates in hospital – Admitted Have you ever suffered from the If 'Yes', give details, dates, name Name and address of usual fame List the country and currency of	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician illy doctor f the country in which you incurred the medi	O Discharged Yes No Control Cal expenses Total		t of Ex	pense	es \$) pı
Dates in hospital – Admitted Have you ever suffered from the If 'Yes', give details, dates, name Name and address of usual fame List the country and currency of Country Country	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician illy doctor f the country in which you incurred the medicurrency	O Discharged Yes No C cal expenses Total	/	t of Ex	pense	es \$) pi
Dates in hospital – Admitted Have you ever suffered from the f 'Yes', give details, dates, name Name and address of usual fame List the country and currency of Country Country Country	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician filly doctor filly doctor Currency Currency Currency Currency	O Discharged Yes No C cal expenses Total	/ Amoun	t of Ex	pense	es \$) pi
Dates in hospital – Admitted Have you ever suffered from the f 'Yes', give details, dates, name Name and address of usual fame List the country and currency of Country Country Country	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician iilly doctor f the country in which you incurred the medicurrency Currency Currency Currency Currency Currency	O Discharged Yes No C cal expenses Total	/ Amoun	t of Ex	pense	es \$) pi
Dates in hospital – Admitted Have you ever suffered from the following items must be incompared to the country Original Doctor's/Hospital a	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician filly doctor fithe country in which you incurred the medicurrency Currency	Discharged Yes No C cal expenses Total Total	/ Amoun	t of Ex	pense	es \$) pi
Dates in hospital – Admitted Have you ever suffered from the lif 'Yes', give details, dates, name Name and address of usual fame List the country and currency of Country Country Country The following items must be inceeded on the life of th	/ / Time am pm e same or similar complaint in the past? es and addresses of treating physician iilly doctor f the country in which you incurred the medicurrency Currency Currency Currency Currency Currency	Cal expenses Total Total	/ Amoun	t of Ex	pense	es \$		am (

Additional Expenses			
Dates expenses incurred – from / / to / /			
Reason for incurring additional travel or accommodation expenses			
List the country and the aureona of the country in which you incomed the costs			
List the country and the currency of the country in which you incurred the costs Country Currency			
List specifically the additional travel expenses			
	A		
Details	Amount		
	\$		
	\$		
	\$		
	\$		
List specifically the additional accommodation expenses			
Details	Amount		
	\$		
	\$		
	\$		
	\$		
Were the expenses incurred as a result of an injury or sickness claimed in Part B of this claim form		Yes 🔘	No (
If these expenses were incurred as a result of injury or sickness to any other person, please give details of caperson and their relationship to you.	use, name, ac	ldress, age c	of
Name	∖ge		
Address			
Relationship to you			
Cause			•••••
Cancellation / Loss of deposit expenses			
What was the reason you could not commence or complete your journey?		Yes	
What was the reason you could not commence or complete your journey? Was the cancellation as a result of injury/sickness to yourself?	n the policy?	Yes O	
What was the reason you could not commence or complete your journey? Was the cancellation as a result of injury/sickness to yourself? Was the cancellation as a result of injury/sickness to some other close family member or person as defined in	n the policy?	Yes O	No (
What was the reason you could not commence or complete your journey? Was the cancellation as a result of injury/sickness to yourself? Was the cancellation as a result of injury/sickness to some other close family member or person as defined in the cancellation of cause, name, address, age of person and their relationship to you.			
What was the reason you could not commence or complete your journey? Was the cancellation as a result of injury/sickness to yourself? Was the cancellation as a result of injury/sickness to some other close family member or person as defined i lf 'Yes', please give details of cause, name, address, age of person and their relationship to you.	n the policy?		

Date of first medical treatment / /							
Has the injured/sick person had a similar condition in t						Yes	No (
Name and address of patient's normal doctor							
Date you or your employer advised travel agent to can				/	/		
Amount of deposit paid and date	\$			/	/		
Balance and full fare and date paid	\$			/	/		
Value of forfeited portion of journey (if applicable)	\$						
Refund received (or entitled to) on cancellation	\$						
-ull amount being claimed	\$						
Nere any alternative arrangements offered?			Yes 🔵	No 🔾	If "Yes'	, please give	e detai
Did you accept any of these alternative arrangements?						Yes 🔘	No (
What additional fares did you incur as a result of the a	rrangement?						
Missed transport expenses							
Missed transport expenses What was the reason that caused you to miss your tra	nsport connection	n?					
What was the reason that caused you to miss your tra							
What was the reason that caused you to miss your tra	u were required t						
What was the reason that caused you to miss your tra	u were required t	to attend?					
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / /	u were required t	to attend? art Time					
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination	u were required t	to attend? art Time			Amoun	t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative	u were required t	art Time ation? Details of curre			Amoun \$	t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative	u were required t	art Time ation? Details of curre				t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative	u were required t	art Time ation? Details of curre			\$	t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative	u were required t	art Time ation? Details of curre			\$	t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative	u were required t	art Time ation? Details of curre			\$ \$	t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative Details	u were required t	art Time ation? Details of curre			\$ \$	t	
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative Details The following items must be included with this claim	u were required t	art Time ation? Details of currer expenses were	paid	ating to ca	\$ \$ \$		the or
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative Details The following items must be included with this claim Receipts and/or tickets relating to additional exper Proof of cause. i.e. original doctors/hospital certific	u were required t St Public transport sess incurred cate relating to in	art Time ation? Details of currer expenses were jured or sick person	oaid or letter rela		\$ \$ \$		nt or
What was the reason that caused you to miss your tra What was the scheduled meeting / conference that yo Date / / Destination What additional expenses were incurred for alternative Details The following items must be included with this claim Receipts and/or tickets relating to additional exper Proof of cause. i.e. original doctors/hospital certific diversion of scheduled public transport	u were required t St. Public transportations sees incurred ate relating to incurred	art Time ation? Details of currer expenses were jured or sick person all expenses and/or a	oaid or letter rela ny refund ap	plicable.	\$ \$ \$ ancellatio	n, curtailme	

oss/theft or damage to baggage					
ive full details on how losses, damage or theft occurred (Detail	each event)				
	rt number				
	n Number				
Vere articles lost/damaged by carrier? Yes \(\) No \(\) Detai	I				
You need to claim compensation from the transport carrier e.g. ost by transport provider).	airline in the fi	rst instance l	pefore submi	tting your claim	to us – for luggag
re any of the items covered by other insurance?	No 🔾				
'Yes', which company	Polic	y Number			
Vere all the missing articles your property? Yes	No 🔾				
C	laim amount				
ltem e.g Cannon Camera, Model IXUS 95	Age e.g: 1 year	Employer Owned	Personal Item	Currency e.g. USD	Purchase Amount AUD \$
			•		AUD \$
National Information along					
Delayed luggage claim Vate your flight arrived / /	Date vour	luggage arri	ved /	/	
low long was your luggage delayed? hours	days ()	veu /		
Essential items purchased		······	Cur		Amount Paid
e.g: toiletries				rency USD	AIIIOUIIL Palu
he following items must be included with this claim					
Proof of ownership of lost / damaged / stolen items (receipts	/ photographs	s, instruction	booklets)		
Receipts or quotes for replacement items					
Police / Authority report or event number (where available)					
Response (acceptance / denial) from transport provider (e.g.		aim for lost l	uggage inclu	ding reimbursem	ent amount
Failure to provide these items may result in delays in processing yo	ur claim It it is	IMDOSSINIA TO			

Are you claiming for collision / theft / or damage to Rental vehicle Personal vehicle Please advise how the accident / damage / theft occurred? If it was a rental vehicle: Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes \ No \ If "Yes", what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming?	Part E – Vehicle excess waiver			
If it was a rental vehicle: Was it hired from a licensed rental agency? What was the excess you were liable to pay? \$ If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? \$ If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes \ No \ Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes \ No \ If Yes, how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes \ No \ If Yes, what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Date of incident / / Cou	ntry	Location	
if it was a rental vehicle: Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes \ No \ If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? S The following items must be included with this claim if for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the police report or police event number (where available). Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.		Rental vehicle	Personal vehicle	
Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Please advise how the accident / damage / theft occ	:urred?		
Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.				
Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.				
Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.				
Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.				
Was it hired from a licensed rental agency? What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? S Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.				
What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes No No If 'Yes', how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	If it was a rental vehicle:			
What was the excess you were liable to pay? If the damage to the vehicle was under the applicable excess of the rental agreement, what was the repair cost? \$ What is the amount you are claiming? \$ Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes \ No \ If 'Yes', how much? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes \ No \ If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Was it hired from a licensed rental agency?	Yes No C		
What is the amount you are claiming? \$ If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes \ No \ If 'Yes', how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes \ No \ If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	What was the excess you were liable to pay?	\$		
What is the amount you are claiming? If it was your personal vehicle: Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes \ No \ If 'Yes', how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes \ No \ If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	If the damage to the vehicle was under the applical	ole excess of the rental	agreement, what was the repair cost? \$	
Was the car comprehensive insured? Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes No If 'Yes', how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	What is the amount you are claiming?			
Were you liable to pay an excess when claiming under your comprehensive insurance this policy? Yes No If 'Yes', how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim after for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	If it was your personal vehicle:			
If 'Yes', how much? \$ If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes \ No \ If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Was the car comprehensive insured?	Yes No		
If the damage to the vehicle was under the applicable excess of your comprehensive insurance policy, what was the repair cost? \$ What is the amount you are claiming? \$ Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Were you liable to pay an excess when claiming un	der your comprehensive	insurance this policy?	Yes No (
What is the amount you are claiming? Was your no claim bonus affected as a result of the claim? Yes No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	If 'Yes', how much? \$			
Was your no claim bonus affected as a result of the claim? Yes No No If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.			ensive insurance policy, what was the repair cost?	°\$
If 'Yes', what was the value in dollars of the loss of or reduction in your no claim bonus? \$ What is the amount you are claiming? \$ The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	What is the amount you are claiming?	\$		
What is the amount you are claiming? The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Was your no claim bonus affected as a result of the	claim? Yes (No 🔘	
The following items must be included with this claim If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	If 'Yes', what was the value in dollars of the loss of	or reduction in your no	claim bonus? \$	
If for collision / damage / theft to a rental vehicle A copy of the rental agreement showing the excess amount you were liable to pay and provide substantiation of payment. A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	What is the amount you are claiming?	\$		
A copy of the police report or police event number (where available). A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	The following items must be included with this clain If for collision / damage / theft to a rental vehicle	n		
A copy of the rental vehicle repair invoice from the hire company. Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	A copy of the rental agreement showing the ex	cess amount you were	liable to pay and provide substantiation of payr	ment.
Documentation evidencing payment of excess or deductible. If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	A copy of the police report or police event num	ber (where available).		
If for collision / damage / theft to your personal vehicle A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	A copy of the rental vehicle repair invoice from	the hire company.		
A letter from your motor vehicle insurance company stating, in dollar value the amount of the excess paid and/or the dollar amount of any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	Oocumentation evidencing payment of excess o	r deductible.		
any no claim bonus forfeited. If the cost of repairs is under the applicable excess, the name of the firm and the receipts for carrying out the repairs to your vehicle.	If for collision / damage / theft to your personal veh	icle		
		pany stating, in dollar v	alue the amount of the excess paid and/or the	dollar amount of
	\bigcirc If the cost of repairs is under the applicable exc	ess, the name of the fir	m and the receipts for carrying out the repairs	to your vehicle.
				se advise the reaso

			Amount beir	ng claimed
Additional Benefi	t		AUD	
ne following items must be included with this claim				
Receipts for expenses related to any claim made for the ab				
Police / Authority report or event number (where available)				
Any other relevant supporting information for claims relating				
Failure to provide these items may result in delays in processing y	our claim. If it is impossible to	provide any or these	items piease ac	wise the reaso
Declaration				
declare that the information I have provided is accurate and caim. I understand that if the information provided is incorrect			would affect th	e result of th
Signature of the claimant			Date	
X			/	/
lease return this claim form to:				