

Baggage, Personal Effects and Money Claim Form

Please complete all relevant sections of this Claim Form and return to:
P J Hayman Claims Department, Stansted House, Rowlands Castle, Hampshire PO9 6DX
Email: claims@pjhayman.com



PJHayman

Claim Number for office use only)

If you require a large print version, please call **02392 419 020**

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 the following to support your claim.

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

Tick against documentation enclosed

For all claims

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).

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 whilst in their care

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 within 24 hours of discovery of 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

Please Note - scan & photocopies are acceptable, however, we do always encourage you to retain the original documentation in case we require any particular documents to be sent in for inspection or retention. Examples where this would be required are high value claims (for prevention of fraud) where we are required to retain originals for a certain period of time.

Claimant/Contact Details:	Claimant Name:	<input type="text"/>	Claimant Age:	<input type="text"/>
Name of Person handling the claim: (if different to above)		<input type="text"/>		
Address for Correspondence: <input type="text"/>				
<input type="text"/>	Postcode:	<input type="text"/>	Tel No:	<input type="text"/>
Email address: <input type="text"/>				

Planned Travel Dates:	Outward Journey Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Return Journey Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country:	<input type="text"/>				Destination:	<input type="text"/>									

Insurance Policy Details:	Name of Travel Insurance: (e.g. Travel Plus)	<input type="text"/>												
Travel Insurance Policy Number:	<input type="text"/>				Date Insurance Purchased:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Previous Insurance Losses:	Have you had any previous insurance losses in the past 5 years (e.g. household, travel, motor)?														Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please provide details of the loss, together with the name of the insurance company and the claim number																		
<input type="text"/>																		

Other Insurance Policy: Yes No

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/theft 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

