



Luggage Delay

Once completed, please return your claim form to:

MAPFRE
22-26 Prospect Hill
Galway
Ireland

or email: traveldept@mapfre.com

Thank you for notifying us of your claim.

Please complete this claim form and return it to MAPFRE as soon as possible.

Please write clearly and in BLOCK Capitals.

Please provide full supporting documentation to avoid delays in processing your claim.

Claim Reference Number:

Policy Number:

Claimant Details

▶ Name of Lead Claimant

Title:

Forename:

Surname:

Sex:

Date of Birth:

Occupation:

Address:

Postcode:

▶ Lead Policy Holder Name

Title:

Forename:

Surname:

Claimant's Relationship to Lead Policyholder:

Holiday/Trip Details

Tour Operator:

Travel Agent:

Destination/Country:

Date Holiday Booked:

Departure Date:

Return Date:

Previous Claim Details

Have you made an insurance claim in the past 5 years?

If **YES** please provide details:

Date	Type Of Claim	Amount Claimed	Company
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DECLARATION: Insurers and their agents share information to prevent fraud and for underwriting purposes. This document, information provided when taking out the Policy and relevant facts form the basis of your claim and may be shared or used for audit purposes. It is a criminal offence to make a fraudulent claim. We investigate all cases and any person suspected of fraud is reported to the Police/Gardai with whom we always cooperate in effecting a prosecution. I/We understand that you may seek information from other insurers to check that the information provided above is truthful and that details of this claim can be used for audit purposes. I/We understand that you may request information from medical providers abroad in relation to a claim where medical advice was sought. I/We declare that to the best of my/our knowledge and belief that all the information I/We have given is correct. I/We have not withheld any information connected with this incident and agree to provide any further information or documentation as may be required. I understand that the insurer does not admit liability by the issue of this form.

▶ **All persons claiming must sign below**

Name (please print)	Signature	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



Personal Effects/Money

Is this claim for: Delayed Baggage Personal Effects Cash Passport

Please give full details of circumstances surrounding the incident and its discovery: _____

Date of Incident: _____ Time of Incident: _____ Time property last seen: _____

Exact location of items when incident occurred: _____

When and by whom was the loss/damage discovered: _____

Was the incident reported to a relevant authority? **YES/NO**

If **YES**, to whom was the incident reported? _____

Date: _____ Time: _____

If claiming for **DELAYED BAGGAGE**, when was the luggage returned to you? Date: _____ Time: _____

If claiming for **CASH**, please confirm the amount of money taken on holiday: _____

Have you received payment from any other source? **YES/NO**

If **YES**, please provide details: _____

Please confirm if you intend on making this claim through any other source? **YES/NO**

Signed: _____

▶ OTHER INSURANCE:

Do you have Household Insurance? **YES/NO**

If **YES**, please provide details: Company Name: _____

Company Address: _____

Policy Number: _____

▶ **Expenditure Details:**

Date of Purchase/ Withdrawal	Description of individual items damaged, lost or stolen. Also personal money & emergency expenses	Initials of owner's property/ money	Place of Purchase/ Withdrawal	Original Purchase Price (not replacement)	Evidence of Purchase Attached YES/NO	Office Use Only: Wear & Tear	Office Use Only: Total
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

▶ **Checklist:** Please ensure you sign the declaration overleaf and enclose the following ORIGINAL documents as applicable

All claims:

Booking Invoice/Travel Tickets showing travel dates and flight/ accommodation cost	YES/NO
Certificate of Insurance (Photocopy only)	YES/NO
Original Property Irregularity report from the airline (or their agents)	YES/NO
Original receipts for the emergency items purchased	YES/NO



▶ **Payment Details (Please tick the appropriate form of payment):**

Cheque: Bank Transfer:

If you wish to receive payment by bank transfer, please supply us with the following information;
(NB Payment cannot be issued by bank transfer unless all below details are provided)

Bank Name and Branch: _____

Account Holder's Name: _____

Account Number: _____

Sort code: _____

IBAN Number: _____

▶ **Information on making a claim for Loss or Damage to Personal Items**

We know that when loss or damage to personal items happens while you are travelling that it can be very stressful. Should you find yourself in this unfortunate situation, we have compiled some information to assist you in submitting your claim.

For the complete terms and conditions of your insurance cover however, please refer to your Travel Insurance Policy Document.

- ▶ The full details of what you are entitled to claim for can be found in your Policy Document.
- ▶ If personal items are lost or damaged while in the custody of an airline or other carrier, the loss/damage must be reported within **24 hours** to the airline/carrier and a 'Property Irregularity Report' obtained from them. A copy of this report will be required when making your claim.
- ▶ All other losses or theft of property must be reported to the police within **24 hours** and a police report obtained. A copy of this report will be required when making your claim.
- ▶ Upon your return to Ireland, the loss/damage must be reported to us within **28 working days**, through our Claim Settlement Service (details below):

Claims Settlement Service: **Mapfre Asistencia
Ireland Assist House
22-26 Prospect Hill
Galway**

(Please see your schedule of cover for the claims department's contact number)

- ▶ You will be required to complete a Claim Form and provide full details of the property lost, stolen or damaged. Receipts or proof of purchase and estimates for the cost of repair to damaged items will be required in most cases *. 'The Property Irregularity Report' and police report will also be required.

Note: *In certain circumstances we may waive the requirement for receipts for specific items, where it is considered unreasonable by virtue of the value of the item or perhaps due to the time that has elapsed since the item was purchased.

Please remember to retain copies of all documents when submitting your claim.

For the complete terms and conditions of your insurance cover, please refer to your Travel Insurance Policy Document.