



## Claim form - Expatriate

**In case of luggage delay, damaged luggage or loss the following documents must be attached:**

- Travel certificate / airline tickets
- Documentation from the airline (PIR report / loss declaration)
- Documentation for the articles (e.g. purchase receipt or statement of account)

**In case of theft:**

- Police report
- Documentation for lost objects

**Please always remember to specify your claim for compensation:**

- Example: "Samsonite suitcase, bought 2005, model XYZ, purchase price 1000 DKK"

If you have been in contact with the alarm center, please add your case number from the alarm center here:

**Please fill in all fields.** As soon as we receive all relevant information, we can start processing your claim. Not before.

### 1. Your insurance information

Company:	Policy number:	
	Expatriate short term	Expatriate long term
	If the incident happened while on business trip/holiday , please fill out	
	Departure date: ____ / ____ yr ____	
	Return date: ____ / ____ yr ____	
	Travel destination: _____	
Your name:	Your social security number/date of birth:	
Your Address:	Zip code/postal code:	City:
Country:	Your Tel. work/ private:	Your e-mail:

**2. Who is the claim concerning?**

Myself                  Other person

If the claim concerns another person, please fill out these fields:

Your relation to the person who suffered the loss:		
His/ her name:	His / her social security number/date of birth:	
Address (if not same as yours):	Zip code/postal code:	City:
Country:	Tel. work/ private:	E-mail:

**3. Information about the incident**

When did the incident occur?                  ____ / ____ yr ____ at (0-24) ____ o'clock
In which country did the incident occur? _____

**4. Please state the nature of the claim**

Theft, burglary, open theft or robbery	Delayed luggage	Fire-, storm- and water damage
Lost luggage	Damaged luggage	Liability/ legal aid

**5. Information about the loss**

Notification to the airline	Did you report the incident to the airline? (Please enclose the report in this claim)	Yes                  No
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	<p>Has the airline paid you compensation</p> <p>Has the missing luggage been returned to you?</p>	<p>Yes                      How much _____</p> <p>No</p> <p>Yes                      , on ___/ ___ yr _____ at _____ o'clock</p> <p>No</p>
Police report	<p>Has the incident been reported to the police? (please enclose the report in this claim)</p>	<p>Yes                      No</p>
Ownership	<p>To whom did the stolen objects belong?</p>	<p>Name _____</p> <p>Address _____ _____</p> <p>Postal code _____</p> <p>City _____</p> <p>Country _____</p>
Theft from hotel room or building	<p>Was the place of the incident locked?</p> <p>Are there visible signs after break-in?</p> <p>Has the building been damaged?</p>	<p>Yes                      How: _____</p> <p>No</p> <p>Yes                      Which: _____</p> <p>No</p> <p>Yes                      How: _____</p> <p>No</p>
Theft from car, bus, tent or caravan	<p>Was the vehicle / tent locked?</p> <p>Car make / model?</p> <p>Were there visible signs of break-in?</p>	<p>Yes                      How: _____</p> <p>No</p> <p>_____</p> <p>Yes                      Which: _____</p> <p>No</p>

**6. About the incident. Please give a detailed description of the incident**

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**7. Expenses (please remember to enclose documentation for each expense. Thank you)**

Diagnosis	Nature of the expense (doctor, medicine, etc. )	Currency	Amount
Total amount			

**Please choose currency for reimbursement:**

**8. Your bank information** (the bank account to which you would like us to transfer the compensation)

Danish bank account	
Name of bank: _____	
Reg. No.: _____	Account No.: _____
Exact name of bank account holder: _____	
International bank account	
Country: _____	
Name of bank: _____	
SWIFT/BIC: _____	IBAN: _____
Exact name of bank account holder: _____	

**9. Other insurance**

Have you taken out local insurance? Yes      No		
If yes, which insurance company: _____		
and your policy number _____		
Do you have a credit card that includes travel insurance?  Yes      No	If yes, please state type of credit card: _____  Name of issuing bank: _____	Card number (first 6 digits and last 4 digits):  _____ XXXXXX _____
Has the claim been reported to the credit card or local insurance?		
Yes      No		

**10. Declaration of content**

The undersigned solemnly declare that the above information is true. I hereby authorize AIG to procure the necessary records / information for the assessment of the incident and questions connected to the incident. I also allow that these records /information be sent to other companies that are to pay compensation in relation to the claim. If the claim has been reported to the national Board of Industrial injuries or to the police, I allow the companies to collect information therefrom.

Date:	Signature:
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Please send this claim to:

Please save to your computer before clicking "submit". Thank you.

[travelclaim@aig.com](mailto:travelclaim@aig.com) or

or

AIG, Brygernes Plads 2, DK-1799 Copenhagen V, Denmark, tel. +45 9137 5300