

DELAYED BAGGAGE CLAIM CHECKLIST

The attached claim form and relevant documents from the checklist below should be sent to us if you have to claim for your essential emergency purchases as a result of the delay of your baggage on your arrival abroad. This list is not exhaustive and we may ask for further evidence once we review your claim. A claim number will be notified to you once we have validated your details.

Proof of insurance and any medical endorsements –

POLICY OR CERTIFICATE OF TRAVEL INSURANCE / VALIDATION CERTIFICATE - your claim will be delayed if you do not submit this. (Please note this is NOT the ATOL certificate) We do not need the policy booklet. Employer's details and policy number where you are insured under a company scheme, insurance reference number etc.

Proof of travel –

This must show total cost of the trip, the names of all passengers, the date of booking and the travel dates and come from the tour operator or airline. If you booked independent arrangements (i.e. car hire, travel tickets, accommodation etc.) please send the booking invoice for each item
If you booked your trip over the internet please ALSO send copies of the confirmation emails you received
If you booked your trip through a travel agent please ALSO send copies of the agents booking confirmation

Evidence to support emergency expenses and items claimed –

Receipts for emergency purchases made whilst awaiting receipt of your baggage
Or credit card / bank statements showing the transactions
Airline PIR or carrier report
Letter from airline / carrier confirming date and time baggage returned to you
Airline / carrier tickets
Baggage check tags

Other insurance –

If you have submitted a claim connected to this one to another insurance company please send copies of all correspondence

To help you with your claim our FAQs can be viewed at www.reactiveclaims.com

Reactive Claims

Attwood House | Mansfield Business Park | Four Marks | Hampshire | GU34 5PZ
Main Office: 01420 383010 | Fax: 01420 558111 | Web: www.reactiveclaims.com

DELAYED BAGGAGE CLAIM FORM

Please answer **ALL** questions using **BLOCK CAPITALS**

Please note that ALL persons claiming under this insurance MUST be listed on the General Details page if we are to consider their claim.

1. Name of carrier (airline, coach / shipping company etc.) responsible for the delay of your baggage:	
2. Date & time <u>YOU</u> arrived at your destination:	Date / / time : am/pm
3. Date & time you should have received your baggage:	Date / / time : am/pm
4. Date & time you eventually received your baggage:	Date / / time : am/pm
5. Were <u>YOU</u> delayed in arriving at your trip destination? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain why:	
6. Was the incident reported to the carrier? <input type="checkbox"/> Yes <input type="checkbox"/> No Date reported: / / If no, please explain why:	
7. Carrier's report number:	8. How long was your baggage delayed? Hours: mins:

9. Please list all expenses / items purchased for which you are claiming. Please number the receipts and cross reference them against the expenses schedule below. *See example highlighted below.*

RECEIPT No.	DATE	NATURE OF EXPENSE	OWNER'S INITIALS	CURRENCY	AMOUNT PAID	£ equiv.	METHOD OF PAYMENT
1	01/01/2013	<i>toothpaste</i>	<i>JAS</i>	<i>US\$</i>	<i>\$2.50</i>	<i>1.66</i>	<i>cash</i>

Continue on a separate sheet if necessary. Please indicate if you have done this <input type="checkbox"/> Yes <input type="checkbox"/> No	10. TOTAL AMOUNT CLAIMED £
---	--------------------------------------

11. Have you submitted a claim to the carrier? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, have you received a payment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how much? £	<i>Office use ONLY</i>
12. Have you or any other claimant listed made any <u>previous</u> claims under a travel insurance policy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:	
13. Do you have any other insurance that may cover this claim e.g. through your bank account or employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details overleaf:	14. Has a claim been submitted to any other company in respect of this trip by any of the other party members? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details overleaf:
15. Name, address and policy number of home contents insurance:	