

Please complete this Claim Form and submit within thirty (30) days of the incident



Please direct the Claim Form and all correspondence to:

Chartis Singapore Insurance Pte. Ltd.
CHARTIS Building, 78 Shenton Way, #07-16
Singapore 079120

NOTICE OF CLAIM

SilkAir (S) Private Limited

Insured Person's Name:	SilkAir Booking Ref No: _____	Telephone No: _____
Residential Address:	Insurance Policy No: _____	Email address: _____ Fax No: _____
Place where incident, loss or illness occurred: S()	Insurance Plan (tick whichever applicable): <input type="checkbox"/> Individual <input type="checkbox"/> Family	Occupation:
Full description of sickness or accident	Date of Birth: _____ Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Occurrence: _____ Time: _____
Are there any other policies of insurance in force covering you in respect of this event? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, please specify: _____		

(A) PERSONAL ACCIDENT/SICKNESS - Medical and Additional Expenses

Please attach original medical receipts and copy of discharge summary or available medical report

Have you ever suffered this or a similar condition or a recurrence of a previous illness or injury?

No Yes If Yes, please specify: _____

Provide Name and Address of your usual attending physician:

(B) CANCELLATION/CURTAILMENT

Please attach documents from SilkAir/ travel agent and any relevant documents to support your claim

Date of booking for flight:	Intended Departure Date:
	Date of Cancellation:

Reason for trip cancellation:

Amount Claimed	Amount paid by you	Amount paid by other sources
_____	_____	_____

(C) BAGGAGE & PERSONAL EFFECTS (Please furnish Police Report & Original purchase receipts and/or warranty cards)

Name of Police Station, SilkAir or other authorities where Report was lodged

Baggage and Personal Effects					
Item	Description	When And Where Purchased	Original Cost Price	Depreciation for Wear And Tear	Amount Claimed
1					
2					
3					
4					
5					

(D) FLIGHT DELAY (Please attach letter from SilkAir stating the reason and duration of delay)

Original Flight Details	Delayed Flight Details
Date:	Date:
Time:	Time:
Place of Departure:	Place of Departure:
Flight No:	Flight No:

(E) BAGGAGE DELAY

Please attach Boarding Pass, Baggage Irregularity Report, Baggage acknowledgement slip and any other correspondence from SilkAir

Original Booking Details:	Delayed Booking Details:
Date:	Date:
Time:	Time:
Place of Departure:	Place of Departure:
Name of Carrier:	Name of Carrier:

(F) OTHERS

In respect of any claim which does not fall within the sections stated above, please provide details of the claim you are submitting. If the space below is insufficient for such details, please attach another page.

The acceptance of this Form is NOT an admission of liability on the part of the Company. Any documentary proof or report required by the Company shall be furnished at the expense of the Policyholder or Claimant.

I do solemnly and sincerely declare that the foregoing particulars are true and correct in every detail and I agree that if I have made or in any further declaration in respect of the said claim shall make any false or fraudulent statements to suppress conceal or falsely state any material fact whatsoever the Policy shall be void and all rights to recover thereunder in respect of past or future claims shall be forfeited.

I hereby authorize any hospital physician, other person who has attended or examined me, to furnish to Chartis Singapore Insurance Pte. Ltd., or its authorized representative, any and all information with respect to any illness or injury, medical history, consultation, prescriptions or treatment, and copies of all hospital or medical records. A duplicated copy of this authorization shall be considered as effective as the original.

Claimant's Name / Date
 (if different from Insured Person)

Claimant's Signature / Date

B) CHECKLIST OF SUPPORTING DOCUMENTS FOR THE CLAIM

COMPULSORY DOCUMENTS FOR ALL CLAIMS

1. Notice of Claim
2. Boarding passes
3. SilkAir Flight Itinerary

Please complete the Travel Claim Form and submit with the following relevant documents. Please note that we reserve our rights to request for any other supporting documents.

Medical Expenses	<ul style="list-style-type: none"> - Original Medical Bills & receipts. - Medical Report/Inpatient Discharge Summary - Copy of passport/itinerary
Hospital Visit or Compassionate Visit	<ul style="list-style-type: none"> - Medical Report - Receipts for airfare/rail/sea transport, hotel accommodation
Emergency Telephone Charges	<ul style="list-style-type: none"> - Original Medical Bills/ - Original Phone Bills
Automatic Extension of Policy	<ul style="list-style-type: none"> - Proof of stay in hospital/ quarantine
Personal Accident	<ul style="list-style-type: none"> - Death Certificate - Medical Report - Autopsy & Toxicology Report - Police report & findings
Trip Cancellation/ Postponement	<ul style="list-style-type: none"> - Death Certificate/ Doctor's letter - Invoice from travel agency and statement showing breakdown of tour package & amount refunded - Invoice showing cancellation charges - Proof of relationship to Insured
Travel Interruption	<ul style="list-style-type: none"> - Proof of hospitalisation - Letter from agency showing breakdown of tour package & amount refunded - Medical report/inpatient discharge summary
Curtailment	<ul style="list-style-type: none"> - Proof of purchase of Additional air-ticket & hotel expenses - Letter from agency showing breakdown of tour package & amount refunded. - Proof of relationship to Insured - death certificate/doctor's letter
Personal Liability	<ul style="list-style-type: none"> - Do not admit liability or make any offer, promise or payment without prior consent. Submit all correspondence/ documents from third parties for our handling

LOSSES AND DELAY

Baggage Delay	<ul style="list-style-type: none"> - Property irregularity Report - Air Ticket and acknowledgement receipt on baggage received
Baggage Loss/ Damage	<ul style="list-style-type: none"> - Property irregularity Report/ Police/ Hotel Mgt Report - Original proof of purchase & original warranty cards/repair bills & photographs - Letter of Compensation from Airlines/hotel mgt
Flight Delay	<ul style="list-style-type: none"> - Delay report from airline showing time & reason for flight delay - Air Ticket and Boarding Pass
Loss of Travel Documents	<ul style="list-style-type: none"> - Police Report - Receipts for obtaining replacement of travel documents - Hotel bills incurred for replacement of documents - Transportation Bill
Golf Loss/Damage	<ul style="list-style-type: none"> - Property irregularity Report/ Police/ Hotel Mgt Report - Original proof of purchase

24 Nov 2011

And any other documents as the Company may require and shall be in such form and of such nature as the Company may prescribe.