



# Missed Departure

In order to support the process of your Missed Departure Claim, we have put together a checklist to ensure you include the correct paperwork to support your claim. Please ensure you read this carefully as failure to supply the correct documents may delay our assessment of your claim.

## Your Checklist of Documents Required

Please Note: We do not require original receipts, passports, EHIC's, death certificates or CD's for the initial claims set up, a top tip is to take a clear photo of your receipts and email them over to us.

**Please ensure you keep the originals safe in case we do still require them.**

No need to staple your papers either; the full contents of each envelope we receive are immediately scanned onto our computer system, and having to remove staples may damage the papers which could delay your claim!

- Completed Claim Form** – You should complete all sections relevant to your claim, save a copy and email to us with all the requested supporting documentation
- Insurance certificate** – Including any medical declarations. This will confirm who you purchased your insurance from and the cover agreed.
- Booking invoice(s)** – With full details of your trip booking (inbound and outbound flight, accommodation, transfers etc.) These documents need to include the booking date, travel dates, destination, names of all people booked to travel/ stay and confirm how much money you paid for the booking.
- If you are claiming for any additional travel plans** – Please include the booking invoice(s). These documents should display the booking date, travel/ occupancy dates, destination, names of all parties booked.
- If the claim was caused by delayed Public Transport** – We will need written evidence from the transport provider to explain the delay.
- If the claim was caused by a breakdown of your own vehicle** – A report from the recovery operator confirming the incident.
- If the claim was caused by any other circumstances not listed above** – We will need independent documentary evidence that supports the incident that took place.

Please make sure you keep the originals documentation and receipts unless we request them from you. If we do then please send them to us by recorded delivery and keep a receipt of proof. Please note that all documentation is destroyed after 3-months to comply with our responsibilities under the Data Protection Act.

Please be aware that in all instances we accept the original reason or circumstances described when a claim is notified or submitted, any change in circumstances or claim description that is submitted at a later date will be referred to our investigations team in line with our fraud prevention policy.

Please consider the environment before printing this checklist. We **do not** require the checklist to be printed and returned.

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Email: [claims@tifgroup.co.uk](mailto:claims@tifgroup.co.uk)

Post: tifgroup Claims, 1 Tower View, Kings Hill, West Malling, Kent, ME19 4UY

*Top Tip: If you tap or click the box you can type away and email or post your claims form and relevant documents to either of the above addresses.*

|  |  |
|--|--|
| Claims Reference Number, if already known: |  |
|--|--|

## Details of the Claimant

|   |  |   |  |            |  |
|---|--|---|--|------------|--|
| Title:                                    |  | First Name:                                   |  | Last Name: |  |
| Address:                                  |  |   |  |            |  |
| Post Code:                                |  | Email Address:                                |  |            |  |
| Date of Birth:                            |  | Telephone:                                    |  |            |  |
| Bank Name:                                |  | Name on Account:                              |  |            |  |
| Account Number:                           |  | Account Type:<br>(e.g. premier, gold, reward) |  |            |  |
| Sort Code:                                |  | SWIFT/BIC<br>(for payments outside of the UK) |  |            |  |
| IBAN (International Bank Account Number): |  |   |  |            |  |

For your convenience and to offer an efficient smoother service, we will pay any claim settlement due directly into your bank account. *We do not accept liability for any payment misdirection or delay due to the incorrect bank details being provided by you.*

## Details of the Insurance Policy and Trip

|  |  |                   |  |
|--|--|-------------------|--|
| Policy Number:   |  | Date of Issue:    |  |
| Insurance Company Name:  |  | Date Trip Booked: |  |
| Policy Cover Level (e.g. silver, gold, standard etc.)  |  | Destination:      |  |
| Trip Date From:  |  | To:               |  |
| Do you or any of the insured party have any other travel insurance cover? If yes give details. |  |                   |  |
|  |  |                   |  |

## Details of Claim

|   |  |       |  |
|---|--|-------|--|
| Planned Departure Date:   |  | Time: |  |
| Actual Departure Date:  |  | Time: |  |
| Describe the reason for the missed departure and at what point the delay in the journey occurred: |  |       |  |
|   |  |       |  |

