**TUNE PROTECT TRAVEL CANCELLATION ASSURANCE**

**IMPORTANT NOTICE**: To enable us to process your claim as quickly as possible, it is important to complete this form accurately and provide us with the original documentation requested at your own expense. If the information/documents supplied are insufficient, we shall advise you if further information / documents are required. Upon completing this form, please send the claim form and all supporting documentations to our servicing agent: **Tune Protect Commercial Brokerage LLC, Blue Bay Tower, Level 8, No. 807, Business Bay, Dubai, UAE**
**P.O. Box: 124177**

Please answer all questions and ☑ boxes where appropriate. Leaving a question blank may result in delays in settling your claim.

Policy Certificate Number: ……

Policyholder's Name: ……

ID No: …… Passport No: ……

Contact No: (Office)…… (House)…… (Mobile)……

Claimant's Name (as per ID / Passport): ……

ID No: …… Passport No: ……

Contact No: (Office)…… (House)…… (Mobile)……

Address: …… Postcode: ……

Email Address: ……

**CLAIMANT'S BANK DETAILS (FOR QATAR ACCOUNT ONLY)**

Account Name:……(**Note: Payment can only be made to Policyholder**)

Bank Account No: …… Bank Name and Location: ……

SWIFT Code / Bank Identification Code (BIC): ……IBAN No: ……

Please fill in the flight information. Leaving this section blank would result in delays in settling your claims.

Airline: …… Flight No: …… Passenger Name Record (PNR) No / Booking No: ……

**First Departure Country:**

Scheduled First Departure Date (dd/mm/yyyy ): ……

Scheduled Return Date (dd/mm/yyyy): ……

I am filing a claim in respect of:- *(Please ☑ the relevant boxes and fill in the blanks)*

| **TRAVEL CANCELLATION / TRAVEL CURTAILMENT** | |
|---|---|
| (a ) Travel Cancellation ❑ | (b) Trip Curtailment ❑ |

For Travel Cancellation or Curtailment please state reason:

Additional information required in the event cancellation is due to visa's application refused by Embassy:-

- Visa Application date (dd/mm/yyyy: ……
- Visa Reject date (dd/mm/yyyy): ……

## DECLARATION

**I declare that the particulars stated above are true and correct and I understand that if I have in this or any further declaration in respect of this claim, make any false or fraudulent statement or suppress, conceal or falsely state any material fact whatsoever my claim may be declined.**

**……..……..** **……**
**Name** **Signature**

**Date: …….. /……. / ……..**

## SECTION 3: CHECKLIST ON THE REQUIRED SUPPORTING DOCUMENTS BY TYPE OF CLAIM

The following checklist will help you assemble the documents required to support your claim

**Please note: i) Dependent upon the circumstances, we may require other evidence to support your claim; in which casewe will contact you.**
**ii) Failure to provide the supporting documents may result in a delay of your claim.**
**iii) Please provide translation if the supporting document is not in English, at your own expense.**

**COMPULSORY FOR ALL TYPES OF CLAIM** ☐ **Duly completed Claim Form** ☐ **Original Flight Itinerary** ☐ **Certificate of Insurance** ☐ **A copy of Passport**

**TRAVEL CANCELLATION**

- ☐ Medical report or Death Certificate of the insured person or the insured person's immediate family member or
- ☐ Proof of relationship between the insured person / deceased and the immediate family member or
- ☐ Any proof stating there is Act of Terrorism in the country of arrival i.e newspaper, article from Media Social or
- ☐ Letter from Airlines/ Common Carrier confirming the length and reasons of delay/ flight cancellation
- ☐ Receipt of expenses incurred for loss of trip i.e common carrier travel expenses, accommodation expenses or cancellation / Administration charges
- ☐ Letter from Embassy confirming the Visa was rejected/ denied.