

Claim form horse insurance

EXHSAF-010118

IMPORTANT:

- Complete all applicable questions as fully as possible to prevent delays in the claim adjustment.
- Always include declarations, original invoices and other supporting documents.
- Incomplete or unsigned claim forms will not be considered.

1. Policy number: _____ Customer number: _____

2. Type of claim: invoice permanent disability euthanasia/death theft Civil Liability Insurance

3. Policyholder:

a. Name: _____ d. Bank account number IBAN: _____

b. Street: _____ e. Email address: _____

c. Postcode/city: _____ f. Telephone : _____

4. Details of horse:

a. Name of horse: _____

b. Gender: _____

c. Date of birth: _____

d. Chip number: _____

5. Claim details:

a. Have you reported the damage to us? yes, date _____ no

b. Date and time of damage: _____

c. Location of damage: _____

d. Circumstances of the damage: *competition/on loan to third parties/training/recreation/stable or outdoor grazing

e. Description of circumstances and damage: _____

f. Has the horse been offered to several veterinarians for this claim? yes no
If so, what is the reason? _____

g. Has the horse been referred by your own veterinarian? yes, to which clinic _____ no

h. Treated on: clinic stable address other, namely _____

i. Is there a relapse? yes no
If so, provide details _____

Date: _____

Signature policyholder: _____

To process your claim, it must be complete with added appendix (by email or post);

In case of an invoice:	- signed report and/or patient report of your veterinarian - original invoice(s) - if taken, imaging (ultrasound/X-ray)
In case of permanent disability or euthanasia/death;	- signed substantiated report or unfit declaration and/or patient report of your veterinarian - if taken, imaging (ultrasound/X-ray/CT/MRI/digital images/film clip) - euthanasia declaration
In case of theft;	- police report - digital photos damage caused by forcible entry
In the event of Civil Liability Insurance (WA); Please note , the WA is a secondary insurance.	- rejection of own AVP/WA insurance - pro forma invoice damage/loss assessment - digital photos damage

*Delete as appropriate