

# Fatal Accident Claim Form

Please ensure that a certified copy of the death certificate or interim death certificate is supplied with this claim form.



**General information**

Insured company \_\_\_\_\_ Policy number \_\_\_\_\_

Name of deceased \_\_\_\_\_ Date of birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_ Postcode \_\_\_\_\_

Occupation \_\_\_\_\_

Date employment commenced \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Gross annual salary (prior to bonuses and overtime) at time of death \_\_\_\_\_

**Accident details**

Date of accident \_\_\_\_\_

Brief description of accident \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Place of accident \_\_\_\_\_

Police contact details (if applicable) \_\_\_\_\_

**How we use personal information about you**

Information which you supply to us, including sensitive information relating to health or medical condition, may be used in a number of ways, for example:

- to assess and process your claim
- to prevent crime (including fraud and money laundering)
- for audit, record keeping, statistical analysis and optional customer satisfaction surveys
- to comply with any legal requirement on us or other companies in our group
- to make decisions about you and other people when selling insurance

We may share information with our contractors (including service providers), agents and other international group companies for these purposes. Information may be put on a register of claims and shared with other companies, including insurers, for fraud prevention. We will share information with other third parties if required to do so by law.

We may transfer your information outside of the European Economic Area (“**EEA**”) for the above purposes, including for secure electronic storage. Whenever we transfer or share information outside, or inside, the EEA we ensure that it is protected.

If you give information to us about another person, you will obtain that person’s permission beforehand to provide the information and for us to use it as described above.

You can obtain further information on:

- how we use your information
- your rights to access information which we hold on you or to correct any inaccurate information

by writing to our Data Protection Officer by e-mail to [DataProtectionOfficer@chartis.com](mailto:DataProtectionOfficer@chartis.com) or by post to Data Protection Officer, Chartis Insurance UK Limited, The Chartis Building, 58 Fenchurch Street, London EC3M 4AB.

**DECLARATION** I DECLARE THAT ALL THE INFORMATION GIVEN IS TO THE BEST OF MY KNOWLEDGE AND BELIEF, FULL, TRUE AND CORRECT, AND I UNDERSTAND THAT IF I GIVE INFORMATION THAT IS INCORRECT OR INCOMPLETE YOU MAY TAKE ACTION AGAINST ME, INCLUDING COURT ACTION.

I GIVE PERMISSION FOR MY PERSONAL INFORMATION TO BE USED AND SHARED IN THE WAYS DESCRIBED ABOVE. I CONFIRM THAT I WILL NOT PROVIDE ANY PERSONAL INFORMATION ABOUT ANOTHER PERSON WITHOUT THAT PERSON'S PERMISSION.

Signed \_\_\_\_\_ Date \_\_\_\_\_