



Hospitalisation Benefit Claim Form

All claims will be paid in accordance with the policy terms, conditions, and limits (see policy for full details).

Serving / Police Staff * (*Delete as applicable)

CLAIMANT DETAILS:

Full Name: _____

Date of Birth: _____ / _____ / _____

Station: _____ Rank: _____ Number: _____

Home Address: _____

Postcode: _____

Email address: _____ Tel No: _____

CLAIM DETAILS

I was a hospital in-patient at: (Name of Hospital and Ward): _____

_____ Tel No: _____

From: _____ / _____ / _____ to _____ / _____ / _____

Totalling: _____ nights (maximum payable 7 nights unplanned)

Suffering from: _____

Date of Accident / Illness: _____ / _____ / _____

Details of Accident / Illness: _____

Caused by: _____



DECLARATION

I declare that the above statements are true and complete and that I remained in a hospital bed in a ward or intensive care unit between midnight and seven o'clock for each night claimed.

I attach a copy of the hospital admission and discharge certificate.

Signed: _____ Date: _____

BANK DETAILS:

When your payment has been approved, we will make the payment to you directly to your bank account.

Branch Sort Code: _____

Account Number: _____

Account Name(s): _____

Name and Address of your bank: _____

TO BE COMPLETED BY TRUSTEE OF SCHEME:

I certify that the claimant is a current participant of the Scheme and that the claim details are correct.

Date of Joining Scheme: _____ / _____ / _____

Signed: _____ Date: _____

Name: _____

DATA PROTECTION NOTICE

Philip Williams (G Ins) Management Ltd collects and uses your data in accordance with current data protection law (which includes, from 25 May 2018, the General Data Protection Regulation (Regulation (EU) 2016/679)) ("data protection law"). We maintain records in regard to policy claims on computer and/or paper files. Information will only be disclosed to third parties in whatever format is considered appropriate by us. By signing this form, you consent to Philip Williams (G Ins) Management Ltd using your data and the information you have provided to process the claim. Further information can be found in our Privacy Policy at <https://www.philipwilliams.co.uk>.

PRIVACY NOTICE

Please Note: Our Privacy Notice can be viewed on our website at www.philipwilliams.co.uk. A hard copy can be provided upon request.