



O2 INSURE CLAIM FORM

RETURN DETAILS

O2 INSURE
CODESTORM HOUSE, WALTON ROAD,
FARLINGTON, PO6 1TR

TEL: 0800 0121553 (free phone)
FAX: 0208 3347387
EMAIL: O2.claim@listening.co.uk

IMPORTANT INFORMATION

Please complete all sections and return to us within 30 days via e-mail, fax or post. We will assess your returned claim form within 24 hours of receipt. Knowingly giving false or misleading information about an Insurance Claim is a criminal offence. If you have any questions about this claim form please contact 0800 0121553.

PERSONAL DETAILS

CLAIM NUMBER

'Office use only'

TITLE	
FULL NAME	
ADDRESS LINE 1	
ADDRESS LINE 2	
ADDRESS LINE 3	
POSTCODE	
DAYTIME CONTACT NUMBER	
DATE CLAIM FORM ISSUED	
EMAIL ADDRESS	
POLICY NUMBER	

INCIDENT DETAILS:

MAKE AND MODEL OF DEVICE	
If claiming for a handset device please give mobile number here	
DATE AND TIME OF INCIDENT	

DESCRIPTION OF INCIDENT – Please provide as much detail as possible regarding your claim. Failure to provide detailed information may result in a delay in dealing with your claim or your claim being rejected. Please see Section 1 if your claim is for Damage to the Device, Section 2 for Theft of the Device and Section 3 for Loss of the Device

The following questions will give you a guide to the extent of information we require from you. Should there be insufficient space on the form, please continue on a separate piece of paper and attach this to the form. The data supplied on this form will only be used for the purpose of processing your claim.

Section 1. Damage To Your Device.

How did the damage occur?

What damage has been caused to the device?

Who was responsible for the damage?

Section 2. Theft Claim Of Your Device.

How did the incident happen?

Was the device in your possession?

Was anything else stolen? If yes, please provide details.

POLICE REFERENCE NUMBER (THIS WILL BE CHECKED WITH THE RELEVANT POLICE STATION).

POLICE STATION & DATE REPORTED.

Section 3. Loss Of Your Device.

Where and how do you think you have lost your handset including date and time?

Have you reported the loss to anyone? If yes, please provide details.

Was the device in your possession? If not who was in possession of the device?

POLICE REFERENCE NUMBER (THIS WILL BE CHECKED WITH THE RELEVANT POLICE STATION).

POLICE STATION & DATE REPORTED.

Section 4. Accessories Claim (Please note that only accessories purchased from O2 that have been damaged, stolen or lost as a direct result of the incident to the device itself can be claimed for).

Please state the accessories you are claiming for. If the items have been damaged please advise the damage sustained.

DECLARATION:

1. I confirm that all details on this claim form that I have provided are correct and the items listed constitute the full extent of my claim.
2. I understand that making a fraudulent insurance claim is a criminal offence and that my details may be passed to the Police if my

claim is identified as fraudulent.

3. I understand that all Pay Monthly Insurance Policies have a minimum excess fee of £25.00 (Twenty Five pounds) which will be added to my next bill.

4. I understand that if I am making a claim on a Pay & Go Insurance Policy an excess of £15.00 (Fifteen Pounds) is payable immediately if my claim is accepted.

I have read and fully understood the declarations above.

Signature

Date

Print Name

Data Protection – The data supplied will only be used for the purpose of processing your claim. The details you provide may be shared and exchanged with other insurers and agencies to prevent fraud, and may be passed to the Police for validation.

It is important that the data you have supplied is kept up to date. You should therefore notify us of any changes so that we may update our records.

O2 Insure policies commencing prior to 1 March 2011 are underwritten and administered by ACE European Group Ltd (ACE) registered in England, No. 112892, 100 Leadenhall Street, London EC3A 3BP. ACE is authorised and regulated by the Financial Services Authority FSA number 202803. Full details can be found on the FSA's website www.fsa.gov.uk/register/home.do or by contacting the FSA on 0300 500 5000.

O2 Insure policies commencing on or after 1 March 2011 are underwritten by Altair Assurances S.A. UK Branch, 260 Bath Road, Slough, Berkshire, SL1 4DX, registered in UK No. FC029774, who are authorised by Commisariat aux Assurances in Luxembourg and regulated by the Financial Services Authority for the conduct of UK business. Your contract is administered by ACE European Group Ltd, who are authorised and regulated by the FSA.