



Please note before filing claim. (Guidance Notes)

- 1. Please complete all sections in this claim form and provide relevant supporting document. Please ensure to provide your mobile number and email address for updating your progress of claim.
2. Please send your completed claim form and supporting document through:
2.1 Postal: Claim Department, P.O. BOX 40 Rong Mueang, Bangkok 10330
2.2 Agent / Broker
3. After receiving your claim form and supporting document, SMS will be sent to your mobile number for claim submission acknowledgement.
4. The list of supporting documents in this claim form is the minimum requirement. In certain circumstance, additional information/document may be required for further claim investigation and assessment.
5. In case of inadequate information/document, AIG will contact you within 5 working days commencing from date of receiving your claim submission.
6. In case of completed information/document, it will take 15 days for claim assessment and AIG will inform you through email or SMS.
7. In case of a claim amount exceeding THB100,000, please confirm your identity and include an ID verification photo in your submission. This can be done by taking a photo of yourself holding your Identification card or passport. Both your face and ID will need to be clear and visible in the photo. You may also mask the blood type and religion information shown on the Identification Card (if any). The ID verification photo should be taken of the claimant or beneficiary and is to be submitted together with your claim form.

Insured Details: (Please complete all sections of this form)

Name of Insured: Policy Number:
Thai National ID number: Sex: Male / Female Date of Birth: / /
Address:
Profession: Email address:
Mobile number: Home / Work contact number:
In case of claimant and the policy holder name is not the same, please provide us with the policy holder's name: Have you submitted claim to other insurance company: Yes No
If yes please specify the name of the insurance company:
For travel insurance: Please state the travel period (DD/MM/YY) from / / to / / Destination:

Claim payment method

Bank Transfer to Saving Account: Please submit a copy of bankbook and ID Card / Passport of accountholder.
Account name Account number
Bank name Bank branch
ID Card / Passport number Email Mobile number
Cashier's cheque (Account payee only)
Please fill the address for sending cheque

Declaration / Authorization

I declare that the statements on this form and the information provided in addition are true and complete to the best of my knowledge and belief.
I am aware that AIG or its representative might inquire my personal information with regards to claim with other insurance companies /related organizations
I give permission to hospital or doctors who treated me the authority to share my medical report to the insurance company or their representative for claim purposes. A copy of this authorization document is to be considered and effective as the original documents.
I give consent to AIG Insurance (Thailand) Public Company Limited to notify the written result of the insurance claim consideration by registered mail or an electronic mail.
I consent to terms laid out in the Privacy Policy of AIG Thailand as shown at www.aig.co.th/en/privacy-policy
Insured / injured person Date Representative Date
(In case of insurer / injured person not able to sign)

Please only fill in the following according to your claims:

- Section 1 : Medical expenses / Hospital Income/ Compensation for surgery Cancer Insurance/ Critical illness
Section 2 : Compensation for loss of personal money / Travel Documents / Golf Equipment and hole-in-one / Loss or Damage of baggage or Personal Effects / Loss of Personal Belongings due to Pickpocket / Home Guard/ Damage or Loss of Personal Baggage due to Vehicle Break in
Section 3 : Travel delay / Missed connecting flight / Baggage Delay/ Flight Diversion / Overbooking
Section 4 : Trip Cancellation or Postponement / Trip Curtailment / Trip Disruption
Section 5 : Accidental Death or Dismemberment/ Permanent Total Disability/ Public Accident Benefit
Section 6 : For any other claims e.g. Personal Liability / Rental Vehicle Excess / Hospital Visitation / Child Guard / Recruiting cost / Premise cleansing expense following covered infectious disease outbreak

Section 1: Medical Expenses / Hospital Income / Surgery Compensation / Cancer Insurance / Critical illness

Date and Time of injuries or sickness: (DD/MM/YY) / / Time: First visit to doctor: (DD/MM/YY) / /

Have you received any treatment before? No Yes ,If Yes Please specify the name of the hospital and Date of visit

Please give specific details of injuries and loss location / in case of sickness please specify symptoms

Claims Supporting Documents:

Medical Expenses / Surgery Compensation

- Original Medical / Surgery receipts (No Copies)
- Copy of Medical Reports
- Copy of Personal ID with certified true copy
- Copy of passport illustrating the dates leaving and entering Thailand by immigration (for International Travel Insurance e.g. Boarding Pass), Flight Itinerary or E- Ticket (For entering/leaving through automatic immigration channel)
- Evidence of back to study in oversea e.g. flight itinerary, tuition registration (for oversea student insurance)
- Letter from employee (In case of group insurance where individual name is not mentioned)

Hospital Income:

- Copy of Medical Receipt or Invoice
- Copy of Medical reports
- Copy of Personal ID of Insured with certified true copy

Cancer Insurance/ Critical Illness:

- Copy of Medical Reports Indicating significant symptoms, diagnosis result, and treatment
- Pathology Report
- Copy of Personal ID of Insured with certified true copy

Section 2: Compensation for loss of personal money / Travel Documents / Golf Equipment and hole-in-one / Loss or Damage of baggage or Personal Effects / Loss of Personal Belongings due to Pickpocket / Home Guard/ Damage or Loss of Personal Baggage due to Vehicle Break in

Date and Time of incident: (DD/MM/YY) / / Location of incident: City / Country

Please give a full description of the circumstances of the incident:

Please give specific detail of losses / damages caused to the items:

List of losses / damaged items	(DD/MM/YY) of purchase	value / repair cost
_____	____ / ____ / ____	_____
_____	____ / ____ / ____	_____
_____	____ / ____ / ____	_____
_____	____ / ____ / ____	_____
_____	____ / ____ / ____	_____

Preliminary Claims Supporting documents:

- Copy of passport with certified true copy
- Copy of travel ticket or boarding pass or passport with certified true copy illustrating entering/leaving Thailand by immigration
- Official Document from Police / Hotel / Transportation Company / Golf Course for assessing your claim
- Please enclose compensation evidence in case hotel or transportation company offer a compensation including repair or change to a new one

Claims Supporting documents:

Compensation for loss of personal money / Travel Documents / Loss of Personal Belongings due to Pickpocket / Damage or Loss of Personal Baggage due to Vehicle Break in

- Police report of the incident within 24 hours.
- Original Receipts of travelling expense, hotel, and compensation of passport or visa issuing (in case of loss or damage of travel document)

Loss or Damage of baggage or Personal Effects

- Letter certifying Loss or Damage incurred from the management of the hotel or transport company in the case that such Loss or Damage is under supervision of the hotel staff or transport
- Police report of the incident within 24 hours in case loss by robbery, burglary, gang robbery or violence to insured
- Copy of receipt of loss and damage of property

Home Guard

- Copy of police report
- Document from Central Police Forensic Science Division
- Quotation of Loss and Damage of property with photos

Golf Equipment and hole in one

- Police report of the incident within 24 hours in case loss of golf equipment in public place
- A written letter of loss or damage issued by relevant person with authority, i.e. management of the hotel, airline, golf course, or public driving range with authority to supervise the place of the Loss or Damage within 24 hours
- Hole-In-One Certification by the golf course manager's signature

Section 3: Travel delay / Missed connecting flight / Baggage Delay/ Flight Diversion / Overbooking

Travel delay / Missed connecting flight / Baggage Delay/ Flight Diversion / Overbooking

Please give a full description of the circumstances of the incident:		Location of the incident (location /City / Country)	
Original Schedule Trip:			
DD/MM/YY / /	Departure time:	Arrival time:	Flight Number:
New schedule:			
DD/MM/YY / /	Departure time:	Arrival time:	Flight Number:

Baggage Delay

Please state in full detail the cause and circumstances of the delay:		
DD/MM/YY of the incident / /	Time:	Location: City / Country
DD/MM/YY of the returned luggage: / /	Time:	
Preliminary Claims Supporting documents:		
- Copy of passport illustrating the dates leaving and entering Thailand by immigration (for International Travel Insurance e.g. Boarding Pass), Flight Itinerary or E- Ticket (For entering/leaving through automatic immigration channel)		
Claims Supporting documents:		
<u>Travel delay / Missed connecting flight / Baggage Delay/ Flight Diversion / Overbooking</u>		<u>Baggage Delay</u>
- Airplane ticket and Boarding Pass or a proof of entering/leaving the country (e.g. Immigration Stamp in the passport)		- A proof of document from airline of luggage delayed
- Proven document of airline of missed flight due to overbooking.		- Official document of receiving the luggage from airline or Transport Company
- Proven document of transport company or airline with specified a reason of flight diversion		

Section 4: Trip Cancellation or Postponement / Trip Curtailment / Trip Disruption

Please specify the reason of Trip Cancellation or Postponement / Trip Curtailment / Trip Disruption		
Original scheduled dates of the trip:		
From: DD/MM/YY / /	To: DD/MM/YY / /	
New scheduled dates of the trip:		
From: DD/MM/YY / /	To: DD/MM/YY / /	
Please list the expenses and amount of Trip Cancellation or Postponement / Trip Curtailment / Trip Disruption		
Please specify detail below if the cause of Trip Cancellation or Postponement / Trip Curtailment / Trip Disruption due to sickness/ injuries/ death of the insured family members and /or travel companion in case of Trip curtailment / Trip Disruption:		
Name / Surname	Relation to Claimant:	Accident date: DD/MM/YY
_____	_____	_____/_____/_____
_____	_____	_____/_____/_____

Please find supporting documents in next page.

Preliminary Claims Supporting documents:

- Copy of passport illustrating the dates leaving and entering Thailand by immigration (for International Travel Insurance e.g. Boarding Pass), Flight Itinerary or E- Ticket (For entering/leaving through automatic immigration channel)

Claims Supporting documents:

Trip Cancellation or Postponement.

- Medical certificate (In case of Trip Cancellation or Postponement due to sickness/ injuries/ death of the insured or family members)
- Copy of official death certificate of insured (In case of the death of the insured or insured's family members)
- Medical certificate (In case of Trip Cancellation or Postponement due to sickness/ injuries/ death of the insured or family members)
- Copy of official death certificate of insured (In case of the death of the insured or insured's family members)
- Document to proof of the relatives or family members of insured e.g. copy of house registration, copy of birth certificate, or copy of marriage certificate (In case of sickness/ injuries/ death of relatives or family members)
- Document of writ (If applicable)
- Official Document from Airport (In case of airport officers strike or any event causing of closed air space or closed many airports)
- Official Document from Police and Copy of house registration (in case insured's house in Thailand was damaged from fire or natural disaster)
- Original receipt from tour company or airline, accommodation and food expenses and in case other compensation was made please provide the documents of the payments

Trip Curtailment

- Medical Certificate
- Copy of official death certificate
- Document to proof of the relatives or family members of insured e.g. copy of house registration, copy of birth certificate, or copy of marriage certificate (In case of sickness/ injuries/ death of insured's family members)
- Proven Document of being travel companion
- Official Document from a quarantine facility for disease control (In case of quarantine follow doctor's instruction causes trip curtailment)
- Official Document from Airport (In case of aircraft hijacking or any event causing of closed air space or closed many airports)
- Document a proof of Natural Disasters occur where in itinerary (In case of natural disaster causing of unable to travel as scheduled)
- Copy of original flight ticket and copy of latest flight ticket enclose with official receipt from all relevant expenses of trip curtailment and aircraft hijacking
- Original receipt from all relevant expenses of trip curtailment and aircraft hijacking and in case other compensation was made please provide the documents of the payments

Trip Disruption

- Copy of passport of family member or travel companion who was hospitalized in hospital with certified true copy
- Copy of passport illustrating the dates leaving and entering Thailand by immigration (for International Travel Insurance e.g. Boarding Pass), Flight Itinerary or E-Ticket (For entering/leaving through automatic immigration channel)
- Quarantine certificate or Medical Certificate (in case quarantine follow doctor instruction)
- Medical certificate of family member or travel companion
- Copy of original flight ticket and copy of new flight ticket with receipt of purchased trip disruption
- Original receipt of travelling expense back home country by economy class, first class of train transport, boat transport, and bus
- Official receipt of travel deposit, advance ticket purchase and/or accommodation paid in advance prior traveling from Thailand and receiving refund documents or non-refundable document

Section 5: Accidental Death or Dismemberment/ Permanent Total Disability/ Public Accident Benefit

DD/MM/YY: / /

Time of accident:

Location:

Description of accident, how?

Preliminary Claims Supporting documents:

- Copy of Personal ID of insured with certified true copy
- Copy of passport illustrating the dates leaving and entering Thailand by immigration (for International Travel Insurance e.g. Boarding Pass), Flight Itinerary or E- Ticket (For entering/leaving through automatic immigration channel)

Claims Supporting documents:

Death, dismemberment, eyesight, or permanent disability

- Medical report with specified dismemberment, eyesight, permanent disability
- Photo of disability/ dismemberment
- Copy of death certificate
- Copy of Autopsy Report or Forensic report
- Copy of police report
- Copy of Personal ID and house of registration with dead stamp
- Copy of Personal ID and house registration of the beneficiary with certified true copy
- Evidence of incident occurring when insured was a passenger in public transport or public place (for public accident benefit)

Section 6: For any other claims e.g. liability of the third party/ accident caused to the rental car/ Tuition fee compensation/ Hospital Visitation/ Child Guard / Recruiting Cost / Premise cleansing expense following covered infectious disease outbreak

Please state in detail the incident:

Date of incident (DD/MM/YY): / /

Time:

Location:

Amount

Baht

Please find claims supporting documents in next page.

Preliminary Claims Supporting documents:

- Copy of national ID of insured with certified true copy
- Copy of passport illustrating the dates leaving and entering Thailand by immigration (for International Travel Insurance e.g. Boarding Pass), Flight Itinerary or E- Ticket (For entering/leaving through automatic immigration channel)

Claims Supporting documents:

Personal Liability

- Copy of national ID / passport with certified true copy of Third-Party and witness
- Letter from Third- Party with specified the incident details, list of loss or damage of property which certified by Third-Party and witness in the incident
- Copy of medical certificate and Original receipt (in case cause accident of others person)
- Original receipt of repair done or original receipt of new purchase in case of damage of a property and Confirmation letter from workshop.

Rental Vehicle Excess

- Original receipt of Rental Vehicle Excess
- Car rental contracts
- Policy scheduled of car rental with specified the excess amount

Tuition fee compensation

- Receipt of tuition fee
- Medical report
- Official document from institution to confirmed study suspension
- Copy of death certificate and Autopsy Report in case a death of family member
- Copy of Personal ID and house registration of the deceased (family member)
- Police report in case of accident

Hospital Visitation

- Original receipt of traveling/ accommodation/ food expenses of family member or friends of the insured for hospital visitation
- Medical report of insured with specified date of admission
- Copy of passport of family member/ friends of insured for hospital visitation

Child Guard

- Original receipt of traveling/ Accommodation/ food expenses of family member who escort child back to Thailand
- Medical report of insured
- Copy of passport of family member who escort child back to Thailand
- Copy of flight ticket
- Travel Itinerary of insured and child

Recruiting Cost

- Receipt of recruiting cost for employee replacement
- Medical document and/or other evidences to prove of permanent work disability
- Copy of Personal ID of injured employee with certified true copy

Premise cleaning expense following covered infectious disease outbreak

- Receipt of premise cleaning expense
- Medical report with specified chief complaint, diagnosis, and treatment
- Written proof of the local health municipal or Government agency's instructions of closure
- Copy of personal ID of injured employee with certified true copy

For any other claims please visit our website www.aig.co.th

Call Center:

Tel. 0 2649 1999 Fax. 0 2649 1998

E-mail: Thailand.cc@aig.com

Claim Department:

23rd Floor, Siam Pivat Tower, 989 Rama I Road, Patumwan, Bangkok 10330, Thailand

Claim inquiry:

Tel. 0 2649 1999 press 1 or 2 (Official hours: Mon - Fri at 8:30 – 17:00)

E-mail: Claimshareservices@aig.com

Complaint and feedback channel:

Tel. 0 2649 1596 Fax. 0 2649 1998

E-mail: complaint@aig.com