

Excess Plus Motor Vehicle Excess Reimbursement Claim Form



- If you have insufficient space to enter all of your claims, please attach a separate signed and dated sheet.
- Please attach / scan all relevant receipts, statements and reports to this form.
- Please return completed form to:

AWN Insurance Pty Ltd

PO Box 4301, Loganholme Qld 4129

Phone: (07) 3802 5577 | Email: general@theclaimshub.com.au

THE INSURED

Employer Name: Qantas Aircrew Club

Binding No: SGS6008

MEMBER DETAILS

Name:

Staff No:

Phone:

Email:

MOTOR VEHICLE DETAILS

Make:

Model:

Year:

Registration No:

DETAILS OF THE COMPREHENSIVE MOTOR INSURER & ACCIDENT

Date of Accident:

Driver at the Time of Collision:

Insurance Company:

Policy Excess:

Policy No:

Expiry Date:

Comprehensive Claim No:

The Other Vehicle Driver's Name:

Accident Details:

DOCUMENTATION

Please provide the following

- ☐ A copy of your motor vehicle insurance policy, showing your vehicle is insured.
- ☐ A copy of the receipt/invoice from your motor vehicle insurance company/repairer showing the excess amount.
- ☐ A copy of the police report or reference / event number (if available):
- ☐ If an Infringement Notice has been issued, please provide details:
- ☐ A copy of your current vehicle registration.
- ☐ A copy of your driver's licence.

IMPORTANT NOTE:

You must file your claim within 30 days from the date of the At Fault collision. Please forward the completed claim form and supporting documents to AWN Insurance within 30 days from the date you have paid your excess.

CLAIM PAYMENT DETAILS - ELECTRONIC FUNDS TRANSFER

Name of Bank:

Account Name:

BSB:

Account No:

For international payment, please provide Bank Swift Code:

Bank Address:

If paying into overseas bank, what currency is the account in? (e.g. USD):

CLAIM DECLARATION

Your Privacy

In the course of providing insurance and processing insurance claims, we need to collect personal and/or sensitive information as defined in Privacy Act 1988 (Cth) (the Act) about persons we insure and persons associated with persons we insure. If an insured does not give us this information, we may not be able to provide insurance or process a claim. In accordance with the Act, our privacy policy contains the information required to be given to persons about whom we collect personal and/or sensitive information. It provides information on how an insured can make a complaint against us for a breach of the Australian Privacy Principles ("APPs"), or registered APP code(s), if any, that binds us.

Your Access to Your Personal and Sensitive Information

An insured can request access to personal and sensitive information that we hold about them. Your rights to access and our rights to refuse access are set out in the Act.

Our Use of Personal and Sensitive Information

We may at any time use personal and/or sensitive information we collect about individuals subject to insurance cover to provide a quotation or assess a proposal for insurance; to provide, amend or renew an insurance policy; or to respond to a claim.

Our Disclosure of Personal and Sensitive Information

We may at any time disclose personal and/or sensitive information we collect to the following types of organisations (some of which may be outside Australia). These include re-insurers; external valuers and appraisers; Loss adjustors, investigators and other organisations retained by us who help us to provide our claims service; professional advisers, such as accountants and lawyers; and other organisations that provide services to us in relation to the provision of insurance. To assist us in providing insurance services to an insured, we may, from time to time, transfer personal and/or sensitive information overseas to the types of organisations listed above in Canada, South Africa, the United Kingdom, Asia-Pacific and the USA. Where we do so, we take reasonable steps to ensure it is kept confidential. Our Privacy Policy statement is readily available on our website at www.awninsurance.com.au

Consent

You consent and authorise us to collect, use, store and disclose personal and sensitive information provided either directly by you or your representative or agent in accordance with the Act. Where personal and sensitive information is provided to us by a person, other than yourself, you agree that all necessary consents to collect, use, store and disclose that personal or sensitive information to us have been made or given. Our privacy policy is readily available on our website www.awninsurance.com.au. Alternatively, please contact us if you would like a copy.

Declaration

I/We do hereby declare that the foregoing answers are true and correct. I agree that if I have made or shall make any false or untrue statement, suppression or concealment, my right to claim could be forfeited.

Your Signature:

Date:

For further informaton, please contact us or go to www.awninsurance.com.au



AWN Insurance Pty Ltd
ABN 78 075 483 206 | AFS Licence No. 246469
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