

Making A Claim



CLAIMS PROCEDURE

In the event of any occurrence likely to give rise to a claim under this Policy, **You** must notify **Us** ensuring that full details are given to **Us** in writing as soon as reasonably possible after the date of the occurrence and in any event within ninety (90) days. Such notice shall include full particulars of the occurrence.



MEDICAL ASSISTANCE NOTIFICATION

In the event of **Illness** or **Bodily Injury** during **Your Trip** which may require hospitalisation, or if **You** have already been admitted to hospital, **You** must notify **Our** nominated emergency service, Cega Group Assistance Team. It has the medical expertise, contacts and facilities to help **You**. It will liaise with the hospital and arrange transport to **Your Country of Residence** when this is considered to be medically necessary. It will be entitled to decide, at its discretion, to repatriate **You** to **Your Country of Residence** as soon as **Your** medical condition is stable and **You** are fit to fly.

It will also arrange transport to **Your Country of Residence** when **You** have received notice of **Illness** or death of a **Relative** at home. **You** must contact them before making alternative arrangements if **You** wish to return home by any means other than that originally booked (i.e. curtail **Your Trip**).

You should contact:

Cega Medical Assistance Team

Tel: +44 (0) 1243 976 393 (24 hours)

Email: assistance@cegagroup.com

You should tell them **You** have a Europesure travel insurance policy and give them the Contract number and the certificate number shown on **Your Schedule of Insurance**

FOR ALL OTHER CLAIMS

Charles Taylor (CEGA)

PO Box 1124

Portsmouth

PO1 9XY

United Kingdom

Tel: +44 (0) 1243 976 250 (UK time 9.00 to 17.00 – Monday to Friday)

Email: ClaimsService@cegagroup.com

CLAIMS CO-OPERATION

You shall provide assistance and co-operate with **Us** or **Our** representatives in obtaining any other records **We** deem necessary to evaluate the incident or claim. In no event shall **We** be liable to pay any claim hereunder unless **You** co-operate with **Us** and/or **Our** representatives as **We** reasonably require in the investigation of the claim. All information, evidence, details of household insurance and medical certificates, as required by **Us**, must be sent at **Your** own expense.