

Colonnade Insurance Société Anonyme Branch in Poland ul. Prosta 67 00-838 Warsaw, Poland

Mon.-Fri. 09.00-17.00

☑ claimstravel@colonnade.pl☑ www.colonnade.pl

## CLAIM FORM delay/loss of luggage, flight delay

TO BE FILLED BY THE CLAIMANT

1.	Policy no.							
2.	Company name							
3.	Name and surname of the Claimant							
4.	Date of birth of the Claimant [DD-MM-YYYY]							
5.	PESEL no.							
6.	Correspondence address							
7.	. E-mail address*							
8.	Phone no.*							
* Giving your telephone number and e-mail is not compulsory, but it may reduce the time it takes to process your claim.								
9.	. TO BE FILLED IN BY THE EMPLOYER							
	1) Company name and address							
	2) Business trip period	from [DD-MM-YYYY]	until [DD-MM-YYY	Y]				
	3) Position							
date signature of an authorised person and company								
10.	Date and place of insured event							
11.	Detailed description of circumstances							
12.	ist of expenses incurred due to the delayed/lost luggage, or delayed flight							
	List of ex	penses	Date of purchase	Amount and currency/value				

13.	3. Do you have another insurance of luggage delay, delay/flight cancellation valid on the day of the event?			□ NO
	If the answ	er is yes, please provide the name of the insurer, policy number and period of policy		
14.		ontacted our Customer Assistance Centre?	☐ YES	□ NO
15.	Have any p	olice reports been made with regard to the event?	□ YES	□ NO
PAY	MENT OR	DER		
	Please tran	sfer the indemnity to:		
	□ bank ac	count no.		
	bank na	me		
	accoun	holder name		
	□ by post	al order to the address		
CLA	AIM DOCUI	MENTATION		
Plea	ise attach th	e following documentation to this claim:		
<b>1)</b> C	riginal recei	ots/invoices for incurred costs/lost items		
<b>2)</b> C	opies of flig	nt tickets / online reservations of the original itinerary		
<b>3)</b> c	opy of the c	arrier's confirmation the event took place along with the decision of granting/refusing to award the damages		
<b>4)</b> C	ther docum	ents confirming the inability of taking the trip.		
Plea	se indicate	the appropriate fields in the declarations below.		
Clai	mant's dec	larations		
☐ Y	ES NO	I declare that on behalf of the above insurance occurrence I have not received the compensation from another insa third party, I am not currently making attempts and I am not going to attempt to receive the compensation.	surance company	or from
I, the	e undersigne	d, declare that all information provided by me in the form is true and in accordance with the facts.		
		leclaration below is voluntary. Moreover, in case of submitting the declarations below on behalf of the person the d a authorized to do so.	ata refers to, you	declare
□ Y	ES 🗆 NO	I agree other insurance companies to make available to Colonnade Insurance S.A. Polish Branch my personal companies – in the extent necessary to determine my eligibility to compensation due to the concluded insurance at this compensation, as well as for these companies to make known the information about the cause of my death or to determine the right of the person authorised on account of the insurance agreement to receive the compensation	agreement and an information indisp	nount of ensable
☐ Y	ES 🗆 NO	I agree to receive from Colonnade documents related to the proceedings concerning the reported loss to the e-ma	ail address I provid	ded.
		I allow Colonnade to provide information about the statues of the claim proceedings, including the contents of the to the reported loss to the Policyholder/Broker involved in the proceedings.	e letters/decisions	s related
		legible signature		
RUL	LES FOR TH	IE PROCESSING OF PERSONAL DATA		

The Controller of personal data is Colonnade Insurance S.A. operating in Poland through Colonnade Insurance Société Anonyme Branch in Poland (hereinafter: Colonnade or Controller). The purpose of processing personal data is the performance of the insurance contract, which is the legal basis for processing. When personal data is obtained from persons other than the Policyholder, the legal basis for processing of the personal data is the legitimate interest of the Controller, which is the performance of the contract. In the case of the collection of personal data concerning health, the legal basis for processing is consent.

Personal data may also be processed in order to comply legal obligations imposed on the Controller, and the necessity of processing such data always arises from the law (concerning: insurance activity, claims handling, tax and accounting issues, statistical and actuarial obligations and consumer protection) and for purposes arising from the legitimate interests of the Controller (i.e. reduction of insurance risks by reinsurance, prevention of losses of the Controller by preventing insurance crime, direct marketing of the Controller's own products by conducting analytical activities and contacting the data subject, ensuring compliance with international sanctions by conducting analyses, and asserting or defending against claims arising from the Controller's activities, including taking the necessary steps to secure them).

Personal data may be disclosed to other entities only in connection with the fulfilment of the above-mentioned purposes and on the basis of a written agreement (e.g. to IT service providers, insurance brokers, loss adjusters, debt collectors, marketing agencies) or in connection with purpose of the legitimate interests

pursued by the Controller (e.g. to insurance companies, reinsurers, financial institutions). Depending on the purpose, personal data are always processed for no longer than the period of limitation of claims or the applicable law. Personal data may be transferred to third countries (outside the European Economic Area) only in situations defined by law, in particular when conditions are met to ensure an adequate level of security of personal data. In order to comply with established international sanctions, personal data related to the insurance contract may be transferred to the company DXC Technology, based in the United States, on the basis of standard data protection clauses adopted by the European Commission, which means that appropriate measures for the protection and security of personal data required by European legislation are ensured.

The data subject has the right to request access to personal data, the right to rectify, erase or restrict processing, the right to object to processing, the right to data portability and the right to lodge a complaint to the supervisory authority in charge of personal data protection (both in Poland and in Luxembourg), as well as the right to withdraw the consent. The provision of personal data is necessary for the conclusion and performance of the contract and the fulfilment of Colonnade's legal obligations. Without providing personal data it is not possible to conclude a contract (unless consents are optional).

The Controller can be contacted by writing to the Colonnade branch address, by calling +48 22 528 51 00 and by sending an e-mail: info@colonnade.pl. In all matters concerning the processing of personal data, in particular exercising rights related to data processing, right to object or transfer of data outside the EEA area, you can contact the Data Protection Officer at Colonnade (dpo@colonnade.pl) or by sending a letter to the address of Colonnade.