



Pet Insurance Claim Form For Advertising and Reward

Please send this form to Atlas Insurance PCC Limited – Ta' Xbiex Seafront, Ta' Xbiex, Malta. PLEASE FILL IN ALL DETAILS and use BLOCK capitals throughout.

Policy No.

Making a claim

Please follow these instructions carefully to ensure that your claim will be processed efficiently and without any need for further clarification.

1. You must phone us on 23 43 53 63 for the approval of any reward BEFORE you advertise it.
2. Claims should be submitted as soon as possible and not later than 2 months from the date the expenses were incurred and must include:
 - A police report and proof that you have notified the relevant authorities;
 - The invoices and receipts to show the costs involved including the receipt of any reward paid; and
 - If the loss or theft happened during your journey and cover is applicable, the booking invoice for your journey or any other official documents which show the dates of your journey and if applicable the police or operator's report.
3. We recommend that you photocopy the completed form and any enclosures for your records.

1. About You

Policyholders' Full Name ID. Card No.
Postal Address
Telephone No. Mobile No.
Email Address

2. About Your Pet

Your Pet's Name Microchip Number
Male Female Dog Cat
Breed

3. Circumstances

When did you first notice your pet was missing Date Time :

When was the animal last seen? Date Time :

Where was the animal last seen?

Please advise circumstance of loss

Did you notify the police about the loss? Yes No

If yes where and when? Place Date

Did you inform the Animal Welfare Department and other relevant animal welfare centres? Yes No

If yes when and whom? Date Who

Did you advertise for information about your pet? Yes No

If yes please give full details and attach receipts.

Please state cost of advertising €

Have you paid a reward? Yes No

Please state amount of the reward €

4. Insured's Direct Credit Details

Please complete your bank details if you wish us to transfer claim settlement into your bank account.

Bank Account details

Name of Bank

Country

IBAN No.

5. Data and Privacy Protection

Atlas Insurance PCC Limited and/or any other subsidiaries of Atlas Holdings Limited or any of its daughter companies (hereinafter 'Atlas', 'Us', 'Our', 'We') are the data controllers, as defined by relevant data protection laws and regulations, of personal data held about you or relating to you and/or to any other person/s whom you insure with Atlas (hereinafter 'Others').

In completing all the forms related to your policies or claims, you confirm your understanding and acceptance of the terms in Atlas's Data Protection and Privacy Statement. You hereby warrant that you have informed Others why We asked for this information and what We will use it for and have obtained the necessary explicit verbal consent.

Atlas collects and processes information about you and Others for purposes which include carrying out its contractual obligations including handling and settling of claims, and preventing or detecting crime (including fraud). Atlas may monitor calls to and from customers for training, quality and regulatory purposes.

Atlas may collect and disclose your and Others' information from/to other entities in order to conduct Our business including:

- managing claims, which may require obtaining data including medical information from healthcare providers (including any public or private hospital or clinic) and/or your employers (for company schemes) and which you hereby authorise;
- administering policies with insurance brokers or other intermediaries appointed by the policyholder;

- helping Us prevent or detect crime by sharing your information with regulatory and public bodies in Malta or, if applicable, overseas, including the Police, as well as with other insurance companies (directly or via shared databases such as the Malta Insurance Fraud Platform), or other agencies or appointed experts to undertake credit reference or fraud searches or investigations; and/or
- Our third party suppliers or service providers to whom We outsource certain business operations.

We will retain data for the period necessary to fulfil the above-mentioned purposes unless a longer retention period is required or permitted by law.

You have the right to access your personal data and ask Atlas to update or correct the information held or delete such personal data from Our records if it is no longer needed for the purposes indicated above. You may exercise these and other rights held in Atlas’s Data Protection and Privacy Statement, by contacting Our Data Protection Officer at The Data Protection Officer, Atlas Insurance PCC Limited, 48-50 Ta’ Xbiex Seafront, Ta’ Xbiex XBX 1021 Malta or email dpo@atlas.com.mt. Please note, however, that certain personal information may be exempt from such access, correction or erasure requests pursuant to applicable data protection laws or other laws and regulations.

If you and Others consider that the processing of personal data by Atlas is not in compliance with data protection laws and regulations, you and Others may lodge a complaint with us and/or the Office of the Information and Data Protection Commissioner by following this link <https://idpc.org.mt/en/Pages/contact/complaints.aspx>

If you wish to view the full Atlas’s Data Protection and Privacy Statement, for a better understanding of how We use this data please visit <https://www.atlas.com.mt/legal/data-protection/>.

Signature of Policyholder _____ Date

--	--	--	--	--	--	--	--	--	--