

Claims Form

The completed and signed claim report is emailed to info@se.sedgwick.com

Name	Surname
Car license plate	Phone Number
E-mail	
Address	Postal Code and City
The airport your car was parked at	When the damage occurred
What was damaged	
What amount you paid / will pay for your deductible.	
Bank account to pay to	

These attachments are required:

1. A copy of your flight ticket
2. A copy of your parking ticket
3. A copy of the approval notice of the damage covered by the insurance company where your vehicle is insured

Signature

I certify that the information provided is complete and truthful. I agree that my personal data may be processed in accordance with the Personal Data Act.

City and Date	Signature
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