

DOCUMENTS CHECKLIST PERSONAL ACCIDENT CLAIM

Important Reminders:

- Submit only certified true copies except as indicated below
- Other requirements may still be required after initial review of submitted requirements
- Contestable claims are subject to investigation and will affect processing time

| A. ACCIDENTAL DEATH AND DISMEMBERMENT | |
|---|---|
| | Police Report or Accident Report |
| | Death Certificate |
| | Birth Certificate (insured and beneficiary/ries) |
| | Marriage Certificate (if married) |
| | Funeral Receipts (if any) |
| | Hospitalization Records and Official Receipts (if confined prior to death) |
| | Pictures showing amputated parts (if any) with the face shown. |
| B. MEDICAL REIMBURSEMENT / ORDINARY ACCIDENT | |
| | Police Report (if due to vehicular accident) |
| | Incident Report &/or Duly notarized affidavit executed by the insured stating the facts and circumstances of the accident |
| | Duly Accomplished Claim Form |
| | Certificate of Insurance. ID, employment Certificate , Proof of enrollment or school certification (if student)/ birth certificate. |
| | Hospitalization Records, Hospitals Statements of Accounts and Official Receipts |
| | Medical Certificate |
| | Doctor's prescription for medicines bought outside |
| | Pictures during confinement (showing amputated parts, if any) |

*The submission of these forms does not necessarily mean that our Company is accepting liability under the policy.
We reserve the right to evaluate all the documents presented and to secure additional proofs when needed.*