

**POLICE FEDERATION**  
**HOSPITALISATION CLAIM FORM**



Serving Officer	
Police Staff	
Special Constable (on duty incident only)	

Name of Force: \_\_\_\_\_

Division: \_\_\_\_\_ Rank: \_\_\_\_\_ No: \_\_\_\_\_

Members Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Email: \_\_\_\_\_

Claimants Name: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Accident / Illness: \_\_\_\_\_

Details of Accident / Illness: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Caused by: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Period of hospitalisation from: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(Note: this must be immediately following accident or illness)

**PLEASE ATTACH CONFIRMATION FROM THE HOSPITAL**

Have you sustained injuries of this nature previously? YES\* / NO\*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by the Trustees of the Federation Insurance Scheme**

I certify that the beneficiary is a subscribing member of the scheme and is entitled to cover provided under it

Signed: \_\_\_\_\_ Position: \_\_\_\_\_

Date: \_\_\_\_\_

**BANK DETAILS**

When your claim has been approved we will make the payment to you directly to your Bank Account by BACS transfer.

Please complete the following: -

Name and address of your Bank: \_\_\_\_\_ Branch Sort Code: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_ Account Number: \_\_\_\_\_

\_\_\_\_\_ Account Name(s): \_\_\_\_\_

\_\_\_\_\_

**DATA PROTECTION NOTICE**

Philip Williams & Company Insurance Management collects and uses your data in accordance with current data protection law (which includes, from 25 May 2018, the General Data Protection Regulation (Regulation (EU) 2016/679)) ("data protection law"). We maintain records in regard to policy claims on computer and/or paper files. Information will only be disclosed to third parties in whatever format is considered appropriate by us. By signing this form, you consent to Philip Williams & Company Insurance Management using your data and the information you have provided to process the claim. Further information can be found in our Privacy Policy at <https://www.philipwilliams.co.uk>