

## Cancellation

Please fill in all fields of the notice of claim form

Attach/Enclose all relevant certificates, etc. in accordance with the insurance terms and conditions

Please note: To be sent to Tryg with proof of rental and payment overview.

Rental confirmation no.:
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### 1. Information about the customer

Customer's name:			
Claim:			
In the case of (please mark):	Cancellation	Sickness/injury	Death
Termination	Employment	Interruption	Contents
Other:			
Detailed description of the incident:			

### 2. Customer's bank details

Bank name:	Account holder:
Sort code and account number: Or SWIFT code or IBAN no.	
Was the stay purchased with a credit card?	
Yes/No	
If yes, please provide card number and card type (e.g. Mastercard, Eurocard)	

### 3. Information about case handling

Name of caseworker at the agency/office/bureau	Date:
Comments:	

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