

Group Income Protection

Notice of absence form

Important Notes:

This form should be completed by the employer, or their appointed representative, when a member of the scheme has been continuously absent from work, or working at reduced capacity, for greater than 4 weeks.

It is a condition of the Policy that absences are notified as early as possible in order that the Generali Claims Management Team can assist you in managing the absence and fairly assess the claim.

Policy Name/Employer:

Policy Number:

Category of Scheme membership:

(As per your policy document or quotation)

Member's Details:

Title: Mr/Mrs/Miss/Ms/Dr/other:

Date of Birth:

Surname:

Sex:

Forenames:

Employee No.

Employer's Details:

Contact name:

Address:

Postcode:

Position in Company:

Telephone Number:

Fax Number:

Email Address:

Membership/Employment Details:

Date joined Employer:

Date joined Scheme:

Did the member join at their first opportunity?

Yes

No

If no, please explain the reason for the delay:

Occupation:

Precise Duties:



Claim Details:

Date first absent:

Salary at date first absent:

Nature of Incapacity:

Please describe what duties the employee is unable to carry out and why:

Are there any other factors affecting your employee's absence from work?:

When are you expecting the employee to return to work? Please give full details:

How We Use Personal Data

You and your members can see how Assicurazioni Generali S.p.A UK Branch uses personal data by visiting www.generali.co.uk/Info/Privacy-Information or contacting our Data Protection Officer by emailing privacy@generali.co.uk or writing to The Data Protection Officer, Assicurazioni Generali S.p.A UK Branch, 4 Thomas More Square, London E1W 1YW.

DECLARATION

We confirm that: (1) the information contained in this form is accurate and complete to the best of our knowledge and belief, and we undertake to advise you of any errors or omissions as soon as they become apparent.

(2) we have all necessary permissions to provide the personal data in, or in connection with, this form to you; and

(3) in accordance with applicable national data protection laws, we have given sufficient information to each member in order for them to understand: (i) what personal data is shared with, and for how long it is retained by, Assicurazioni Generali S.p.A., (ii) the purpose of such sharing and (iii) the identity of Generali or a description of the type of employee benefits organisation (such as Generali) with whom data is shared.

We understand that by issuing this form, or by starting the claims process, or by accepting proofs of claim, you shall not be held to admit the validity of any claim nor to have waived any rights of defence in this respect and no liability will be accepted by you until confirmed in writing by authorised officers of Assicurazioni Generali S.p.A. We undertake to advise Assicurazioni Generali S.p.A. of any change in the member's circumstances, including (but not limited to) any change in their state of health or medical condition, change of address, change in employment status, or the undertaking of any work (whether paid or unpaid). We authorise Assicurazioni Generali S.p.A. to undertake any enquiries deemed necessary to assess the claim and/or assist us with the management of the absence."

When you are ready to submit this document please print it, sign it and return it to Generali.

You can email this form to groupclaims@generali.co.uk

- or send by post to: Claims Dept, Generali Employee Benefits, 4 Thomas More Square, London E1W 1YW

SIGNATURE

DATE

NAME

Assicurazioni Generali S.p.A. UK Branch, 4 Thomas More Square, London E1W 1YW

Company incorporated in Trieste in 1831. Share capital €1,569,773,403 fully paid-up. Registered office at Piazza Duca degli Abruzzi 2, Trieste, Italy.
Italian tax identification and companies registry number 00079760328. Authorised by Istituto per la Vigilanza sulle Assicurazioni (IVASS).
Registered in the IVASS register of insurance and reinsurance companies under no. 1.00003.
Parent company of Generali Group and entered in the IVASS register of insurance groups under no. 026.
UK company registration no. BR1185.

