

OFW INSURANCE CLAIM FORM

IMPORTANT INSTRUCTIONS:

Accomplish the form and email it together with the scanned copy of required documents to **migrantclaims@pioneer.com.ph** with subject format: NEW CLAIM/AGENCY NAME/OFW'S NAME/CLAIM BENEFIT.

Please be informed that the company reserves the right to request for additional documents as deemed necessary. Submission of documents does not guarantee approval of claim. Documents will be reviewed and evaluated subject to limits, terms and conditions of the Insurance Policy. Failure to submit the required claim documents within the prescribed period may be grounds for denial of the claim.

Product:					
Product:		Policy/Statement of Insurance No:			
□ OFW Mandatory Insurance (Agency-Hired) □ Direct-Hired/Balik-Manggagawa					
Name of Agency/Assured:					
Name of Agency's Representative: (Last Name, First Name, Middle Name)		Position:			
Insured OFW Information					
Name of OFW: (Last Name, First Name	, Middle Name)				
Name of Employer:	Name of Employer:		Occupation:		
Email address:		Contact Number:			
Country of Deployment:		Duration of Employment Contract:			
Date of Departure (mm/dd/yyyy):		Date of Arrival (mm/dd/yyyy):			
Benefits to Claim:(Please check w	Amount of Claim:				
			Remains Repatriation W Mandatory insurance only)		
List of Documents	1.		6.		
for Submission:	2.		7.		
	3.		8.		
	i.		9.		
5.			10.		
Claimant Information (Person filing the Claim)					
Name of Claimant: (Last Name, First Name, Middle Name)		Relationship to Insured OFW:			
Email address:		Contact Number:			
In compliance with the Data F	Privacy Act of 2012, please give us your co	onsent below.			
I agree and consent that to the ex	Privacy Act of 2012, please give us your content required by law, Pioneer Insurance & Sure tion form for any of the following purposes, in	ety Corporation m			
I agree and consent that to the excontained in my insurance application; a. to process my application; b. to administer my policy/ies; c. to provide customer service and d. to research and conduct data a	ktent required by law, Pioneer Insurance & Sure tion form for any of the following purposes, in	ety Corporation m accordance with			
I agree and consent that to the excontained in my insurance application; a. to process my application; b. to administer my policy/ies; c. to provide customer service and d. to research and conduct data a e. to inform me of latest updates, I am aware and have read Pioneer	ctent required by law, Pioneer Insurance & Sure tion form for any of the following purposes, in d support; nalytics to improve customer service; and	ety Corporation m accordance with policy/ies.	the Data Privacy Act of 2012 an	d Pioneer's Data Privacy	
I agree and consent that to the excontained in my insurance application; b. to administer my policy/ies; c. to provide customer service and d. to research and conduct data a e. to inform me of latest updates, I am aware and have read Pioneer right to object, may be viewed via Yes, I also like to get special of companies and partners is shown	Attent required by law, Pioneer Insurance & Suretion form for any of the following purposes, in d support; nalytics to improve customer service; and special offers, and event invites related to my so Data Privacy Notice, which contains my right	policy/ies. s as a data subjetotice. tes and partners and that this requ	the Data Privacy Act of 2012 and ct, including the right to access of Pioneer Insurance & Surety (vires sharing of my personal cor	d Pioneer's Data Privacy and correction, and the Corporation (list of member	
I agree and consent that to the excontained in my insurance application; b. to administer my policy/ies; c. to provide customer service and d. to research and conduct data a e. to inform me of latest updates, I am aware and have read Pioneer right to object, may be viewed via Yes, I also like to get special off companies and partners is shown	Attent required by law, Pioneer Insurance & Suretion form for any of the following purposes, in a support; nalytics to improve customer service; and special offers, and event invites related to my as a support of the privacy Notice, which contains my right www.pioneer.com.ph/about-us/data-privacy-neers, event invitations, and updates from affiliation www.pioneer.com.ph/about-us). I understathe assurance that my personal contact detail	policy/ies. s as a data subjetotice. tes and partners and that this requ	the Data Privacy Act of 2012 and ct, including the right to access of Pioneer Insurance & Surety (aires sharing of my personal core the utmost care and will not be	d Pioneer's Data Privacy and correction, and the Corporation (list of member	
I agree and consent that to the excontained in my insurance application; a. to process my application; b. to administer my policy/ies; c. to provide customer service and d. to research and conduct data a e. to inform me of latest updates, I am aware and have read Pioneer right to object, may be viewed via Yes, I also like to get special off companies and partners is shown these affiliates and partners with	Attent required by law, Pioneer Insurance & Suretion form for any of the following purposes, in a support; nalytics to improve customer service; and special offers, and event invites related to my as a support of the privacy Notice, which contains my right www.pioneer.com.ph/about-us/data-privacy-neers, event invitations, and updates from affiliation www.pioneer.com.ph/about-us). I understathe assurance that my personal contact detail	policy/ies. s as a data subjective. tes and partners and that this requise are treated with	the Data Privacy Act of 2012 and ct, including the right to access of Pioneer Insurance & Surety (lires sharing of my personal corn the utmost care and will not be lace	d Pioneer's Data Privacy and correction, and the Corporation (list of member ntact information with be sold to other companies.	