

Police Federation Members Legal Expenses Insurance claim form

To enable your claim to be dealt with as quickly as possible, please complete this form and return it to Arc Legal Group at polfed@arclegal.co.uk, fax: 01206 233 041 or mail: PO Box 8921, Colchester, CO4 5YD.

Note:

1. If you require any assistance in completing the form, please call the Claims Department on **0344 770 9000**.
2. You must not delay in returning the form as there are often strict time limits that apply and any delay could prejudice the position
3. Until the claim is accepted there is no cover for any legal fees incurred by the Member.
4. The Member's claim cannot be accepted until this form is returned and assessed.
5. **Please forward a copy of the Member's charge sheet/summons with this claim form**

Only legal fees with our specific prior consent will be covered under this insurance.

Section 1: member details

Member name

Address

Contact details

Telephone (day)

Telephone (evening)

Telephone (mobile)

Email address



Police Federation Members Legal Expenses Insurance claim form

Warrant number	
Federation representative	

Section 2: validation details

Name of person validating	
Date started with force	DD/MM/YYYY
Is the member a subscribing member? (constable/sergeant/inspector)	
Date cover started	DD/MM/YY
Any other relevant details	

Section 3: claimant details (if different to member)

Claimant name	
Address	
<i>Contact details</i>	
Telephone (day)	



Police Federation Members Legal Expenses Insurance claim form

Telephone (evening)	
Telephone (mobile)	
Email address	
Relationship to member	

Section 4: claim details

Date of the alleged offence	DD/MM/YYYY
Date the claimant first became aware of the problem	DD/MM/YYYY
Has the claimant sought advice, or instructed a firm of solicitors about this problem? If so, please provide the details	
Does the claimant have any other insurance policies which may cover this claim? If so, please specify	

4a: criminal (including motor prosecution)

Has the claimant received a summons/been charged with a criminal offence/motor prosecution (if yes please attach a copy of the charge sheet/summons with this claim form)	
Date of hearing	DD/MM/YYYY
Time of hearing	00:00 am/pm
Court	



Police Federation Members Legal Expenses Insurance claim form

4b: interview

Is the claimant to be interviewed to with an event which might lead to the claimant being cautioned or charged with a criminal offence?	Yes
Date of interview	DD/MM/YYYY
Time of interview	00:00 am/pm
Location	

4c: internal disciplinary

Has the claimant been served papers in relation to a misconduct tribunal panel or a police appeals tribunal? (if yes please attach a copy of any papers served)	
Date of hearing	DD/MM/YYYY
Time of hearing	00:00 am/pm
Location	

4d: further details

<p>Please detail as fully as possible the nature of the claim / incident (attach additional sheets if needed).</p> <p>Also, send us photocopies of any documents/letters that relate to this claim.</p> <p>Please forward a copy of the charge sheet/summons with this claim form</p>	
---	--



Police Federation Members Legal Expenses Insurance claim form

--	--

Declaration

I declare that the information supplied in this form and the documents sent in support of the claim represent a true, complete, and honest statement of the facts and that I was not aware these could give rise to a claim at the time of taking out the cover.

Arc Legal Group are committed to protecting and respecting your privacy in accordance with the General Data Protection Regulations. Any personal or special category (sensitive) information provided in this claim form or throughout the handling of the claim will only be used in accordance with our privacy statement which can be found at www.arclegal.co.uk.

We may need to share your personal or sensitive information with other organisations. We will not disclose your personal or sensitive information for any purpose other than the purpose for which it was collected.

We shall not keep your personal information for any longer than necessary.

I agree that this information can be forwarded to an appropriate third party but solely for the purposes of assisting or dealing with the claim.

I also agree that the third party can disclose to Arc Legal Group any information it reasonably requests from them relating to my claim.

Signed	
Date	

