

Line Manager's name and Rank:

(Block capitals please)



Group Insurance Scheme Unsocial hours benefit claim form - Serving Officers

You are eligible to claim this benefit if you have been off sick for more than 14 days and were scheduled to work unsocial hours between 20.00hrs and 06.00am. Benefit is payable from the 15th day of absence and for a maximum of 8 weeks, within 24 weeks from the date of disablement.

The maximum benefit you can claim is dependent on your weekly contracted working hours.

For example: 40 contracted hours per week = 320 hours benefit (8 weeks x 40 hours)

20 contracted hours per week = 160 hours benefit (8 weeks x 20 hours)

Unsocial hours benefit is applicable to your unsocial hours enhancement at 7.5% of basic salary, up to a weekly limit of £60-constables, £75-Sergeants or £95-Inspectors (as applicable).

Home add	ame Date of Birth								
	ress								
	Postcode Home telephone no							Rank	
Email addr	ess								
First date of	of absence								
First date of	of claim (th	is must be	after 14 da	ys of abse	nce)				
Last date of	of absence								
	4 day exce	ess period	ere rostered) and detail t laimed per uns	these shifts	s below:			ole hours	
ek commencing te):	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total Unsociable Hour claimed (per week):	
								Week 1:	
								Week 2:	
								Week 3:	
								Week 4:	
								Week 5:	
								Week 6:	
								Week 7:	
					Total n	umber of hou	rs claimed :	Week 7:	
Normal Ho	urly Rate o	of Pay £			Total n	umber of hou	rs claimed :	Week 7:	
Copies of pattern, sh	payslips cooking you	overing tl ur positio	ne dates cla	aimed togo tern at the	ether wit	th a copy o	of your ur	Week 7:	

Please continue overleaf.
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I hereby declare that:

- The number of hours I am claiming are based on the hours I was scheduled to work
- I have suffered a loss of unsocial hours benefit
- I was a subscribing member of the Avon and Somerset Police Federation group insurance scheme for the period of this claim

Signature			Date	•••
			ormation held by the Force ur claim and membership o	
Signed on behalf of the	ne JBB			
(confirming scheme mem	nbership on the	e dates the u	unsocial hours benefit is b	eing claimed for)
Please complete the payments to be made	de direct to	your nom	ninated bank account	t: -
Branch sort code:		/		_
Account name:				
Account number:				

George Burrows are acting on behalf of insurers, which enables us to handle certain claims on their behalf.

This claim form must be submitted by the Federation office.

By submitting this claim via email to George Burrows, we hereby confirm that the claimant was a member of our Group Scheme at the date of the incident and is therefore an eligible claimant.

DATA PRIVACY NOTICE

George Burrows is a trading name of Arthur J. Gallagher Insurance Brokers Limited (Gallagher).

We are the data controller of any personal data you provide to us. We collect and process personal data in order to offer and provide insurance services and policies and to process claims. Personal data is also used for business purposes such as fraud prevention and detection, financial management, to generate risk modelling, conduct analytics including to advise, improve and develop our products and services and to comply with our legal and regulatory obligations. This may involve sharing information with, and obtaining information from, our group companies and third parties such as (re)insurers, other brokers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators or fraud prevention agencies. We may record telephone calls to help us to monitor and improve the service we provide as well as for regulatory purposes.

Please see our Privacy Notice for further information on how your personal data is used, shared, disclosed and retained, your rights in relation to your personal data and how to contact our Data Protection Officer. Our Privacy Notice can be found at https://www.ajg.com/uk/brokerage-privacy-policy/. From time to time we may make important updates to our Privacy Notice and these may in turn affect the way we use and handle your data. Please ensure you review our Privacy Notice periodically to ensure you are aware of any changes.

If you are providing us with personal data of another individual that would be covered under the insurance policy we may be placing or services we may provide to you, you shall ensure that you have obtained all appropriate consents, where required, tell them you are providing their information to us and show them a copy of this notice. You must not share personal data with us that is not necessary for us to offer, provide or administer our services to you.

GeorgeBurrows