

Travel Pattern Questionnaire

Name of Insured: _____

Policy Number: _____ Renewal Date: ____/____/____

Important Notes

1 Please declare trips to the same destinations but which have different durations. For example, 20 trips to France, but 5 of those trips have a 10 day average duration and the other 15 trips have a 3 day average duration.

Example

Destination	Number of Trips	Average number of days	Maximum number of days
Europe - Europe, the Channel Islands, the Republic of Ireland, Madeira, the Canary Islands, Syria, Turkey, Tunisia, Egypt, Israel and all countries bordering the Mediterranean sea.	5	10	10
Europe - Europe, the Channel Islands, the Republic of Ireland, Madeira, the Canary Islands, Syria, Turkey, Tunisia, Egypt, Israel and all countries bordering the Mediterranean sea	15	3	3

2 1 person travelling equals 1 trip. Therefore 5 employees on the same journey to the same destination will be classed as 5 trips.

Travel pattern			
Destination	Number of Trips	Average number of days	Maximum number of days
United Kingdom - England, Scotland, Wales and Northern Ireland including the Isle of Man. <i>(cover can only be provided for trips within the UK which involve either air travel or an overnight stay)</i>			
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Europe - Europe, the Channel Islands, the Republic of Ireland, Madeira, the Canary Islands, Syria, Turkey, Tunisia, Egypt, Israel and all countries bordering the Mediterranean sea.			
Europe - Europe, the Channel Islands, the Republic of Ireland, Madeira, the Canary Islands, Syria, Turkey, Tunisia, Egypt, Israel and all countries bordering the Mediterranean sea.			
Europe - Europe, the Channel Islands, the Republic of Ireland, Madeira, the Canary Islands, Syria, Turkey, Tunisia, Egypt, Israel and all countries bordering the Mediterranean sea.			
North America - United States of America, Canada and the Caribbean			
North America - United States of America, Canada and the Caribbean			
North America - United States of America, Canada and the Caribbean			
Rest of the World - All countries outside of the UK or Europe not including North America			
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When complete, please return this form to: Ageas Insurance Limited, Personal Accident Underwriting, 6th Floor, One America Square, 17 Crosswall, London EC3N 2LB Tel: (0370) 241 6182 Fax: (0207) 264 2864 Email: patravel.underwriting@ageas.co.uk

Ageas Insurance Limited

Registered office address

Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire SO53 3YA

www.ageas.co.uk

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