

PruProtect claims

Additional information we may require from you

This is a guide to the type of information that we may request. The information requested will be based on the circumstances of your claim.

Benefit	Additional information required when registering the claim	Specific documentation required
Life Cover	<ul style="list-style-type: none"> ■ Where death occurred (UK or abroad) ■ Date of death ■ Cause of death 	<ul style="list-style-type: none"> ■ Original death certificate ■ Probate ■ GP file may be requested
Mortgage Free Cover: Death Claim	<ul style="list-style-type: none"> ■ Where death occurred (UK or abroad) ■ Cause of death ■ Date of death 	<ul style="list-style-type: none"> ■ Original death certificate ■ Documents from your loan provider detailing loan value, purpose, date of agreement and start date ■ GP file may be requested
Immediate Cover: Accidental Death	<ul style="list-style-type: none"> ■ Where death occurred (UK or abroad) ■ Cause of death ■ Date of death 	<ul style="list-style-type: none"> ■ Original death certificate ■ GP file may be requested
Waiver of Premiums on Death	<ul style="list-style-type: none"> ■ Where death occurred (UK or abroad) ■ Cause of death ■ Date of death 	<ul style="list-style-type: none"> ■ Original death certificate ■ GP file may be requested
Terminal Illness	<ul style="list-style-type: none"> ■ Cause of claim ■ Date of diagnosis/life changing event 	<ul style="list-style-type: none"> ■ GP file may be requested
Serious Illness Cover	<ul style="list-style-type: none"> ■ Cause of claim ■ Date of diagnosis/life changing event ■ Date of surgery if planned or already performed 	<ul style="list-style-type: none"> ■ GP file may be requested
Serious Illness Cover and Health Cover Optimiser	<ul style="list-style-type: none"> ■ Cause of claim ■ Date of diagnosis/life changing event ■ Date of surgery if planned or already performed 	<ul style="list-style-type: none"> ■ GP file may be requested
Mortgage Free Cover: Serious Illness Cover	<ul style="list-style-type: none"> ■ Cause of claim ■ Date of diagnosis/life changing event ■ Date of surgery if planned or already performed 	<ul style="list-style-type: none"> ■ Documents from your loan provider detailing loan value, purpose, date of agreement and start date ■ GP file may be requested

Benefit	Additional information required when registering the claim	Specific documentation required
<p>Income Protection Cover and Waiver of Premiums on Incapacity</p> <p><i>(NB: There is a waiting period on this benefit before a claim will be paid – this is called the deferred period)</i></p>	<ul style="list-style-type: none"> ■ Cause of claim ■ Date incapacity diagnosed ■ Medical certificate (sick leave document) for the period you are unable to work and earn an income ■ Date of first absence from work due to incapacity 	<ul style="list-style-type: none"> ■ GP file may be requested <p>Proof of income:</p> <p>Employee:</p> <ul style="list-style-type: none"> ■ Certificate of Pay – P60 ■ Medical certificate (sick leave document) <p>Self employed:</p> <ul style="list-style-type: none"> ■ Medical certificate (sick leave document) ■ Profit and loss account for at least 12 months prior to your incapacity ■ Last tax return ■ Agreed Statement of Account – SA302 or SA310 <p>Proof of loss of income:</p> <p>Employee:</p> <ul style="list-style-type: none"> ■ We will request documentary proof from your Employer of your income in the 12 months prior to your incapacity. <p>Self employed:</p> <ul style="list-style-type: none"> ■ We will request documentary proof from your Accountant of your income for a period of at least 12 months prior to incapacity. We will use your earnings for the highest 12 months within a period of at least 24 months prior to incapacity. <p>We will also require other financial information such as details of any continuing income from your employment or any benefits you are receiving from other insurances being paid to you as a result of your incapacity. Please refer to your Plan Provisions for further details.</p>
<p>Disability Cover</p>	<ul style="list-style-type: none"> ■ Cause of claim ■ Date incapacity diagnosed ■ Date of surgery if planned or already performed ■ Date of first absence from work due to incapacity (Category C claims) 	<p>CATEGORY C CLAIMS ONLY</p> <ul style="list-style-type: none"> ■ GP file may be requested <p>Proof of income:</p> <p>Employee:</p> <ul style="list-style-type: none"> ■ Certificate of Pay – P60 <p>Self employed:</p> <ul style="list-style-type: none"> ■ Profit and loss account for at least 12 months prior to your incapacity ■ Last tax return ■ Agreed Statement of Account –SA302 or SA310

Benefit	Additional information required when registering the claim	Specific documentation required
Disability Cover - continued		<p>Proof of loss of income:</p> <p>Employee:</p> <ul style="list-style-type: none"> We will request documentary proof from your Employer of the loss of 80% - 100% of your income, for each month of each 4 month Deferred Period. <p>Self employed:</p> <ul style="list-style-type: none"> We will request documentary proof from your Accountant of the loss of 80% - 100% of your income, for each month of each 4 month Deferred Period.
Unemployment Cover <i>(This is administered by St Andrews Insurance)</i>	<ul style="list-style-type: none"> Date notified of unemployment/date unemployed 	<ul style="list-style-type: none"> This will be requested by St Andrews Insurance at the time of registering a claim
Carer Cover <i>(This is administered by St Andrews Insurance)</i>	<ul style="list-style-type: none"> Date of becoming a carer Relative's diagnosis and date of diagnosis 	<ul style="list-style-type: none"> This will be requested by St Andrews Insurance at the time of registering a claim
Waiver of Premiums on Serious Illness Cover	<ul style="list-style-type: none"> Date of diagnosis/life changing event Date of surgery if planned or already performed 	<ul style="list-style-type: none"> GP file may be requested
Waiver of Premiums on Incapacity	<ul style="list-style-type: none"> Cause of claim Date incapacity diagnosed Date of surgery if planned or already performed Medical certificate (sick leave document) for the period you are unable to work and earn an income Date of first absence from work due to incapacity 	<ul style="list-style-type: none"> Medical certificate (sick leave document) GP file may be requested

For Health Cover only claims call 0800 012 1792

For further information about protection claims call 0845 601 0072