


KAMMARKOLLEGIET
Claim form

URA

For faster processing, it is important that the form is accurately filled in and personally signed. You can fill in this form electronically, but it must be submitted with a signature, which means that the form must be printed out, signed, and then sent to Kammarkollegiet's postal address, 651 80 Karlstad or by e-mail to forsakring@kammarkollegiet.se

Personal details

Given name and surname		Swedish Personal ID number (YYMMDD-NNNN)	
Postal delivery address		Postal code and city	
Telephone number		E-mail address	
The claim form relates to: <input type="checkbox"/> Dispatched <input type="checkbox"/> Accompanying adult <input type="checkbox"/> Accompanying children		If the claim for compensation relates to accompanying family members, state the name and Swedish Personal ID number	

Complete only one claim form per person.

Details of the bank account claim – Account in Sweden

Fill in the bank account number to which the payment is requested to be made. If you do not fill in something here, the compensation will be disbursed by a postal check.

Clearing number	Account number		
State bank name and city		Account holder	

Details of the bank account – Account outside Sweden

Fill in the bank account number to which the payment is requested to be made. If you do not fill in something here, the compensation will be disbursed by a postal check.

IBAN number/Bank account number	SWIFT (BIC)
Bank code (e.g. BLZ, SORT CODE)	The name and address of the bank

Date of injury/loss

Year, Mon, Day

Certification by the authority

Authority	
It is hereby certified that the claim form relates to a person covered by the URA insurance	
Signature	Position
Printed name	Telephone number
E-mail address	

Information about the injury/loss

Type of injury or illness		Date	Site of injury
Type of injury/loss Personal injury cover Working hours Leisure time Disability and death benefits Visits by close relatives Travel to a close relative		Medical care and Dental care cover Maternity and Childbirth Home Transport cover Baggage Delay cover Liability Cover Legal expenses cover	EU card presented
Describe in detail what occurred			
Have you been on sick leave for this injury or illness?		If yes, from	Until
Yes No			
Has a claim for reimbursement for the injury/illness or loss been filed with another insurance company?		If yes, which insurance company?	
Yes No			
Has this part of the body previously been subjected to an injury or illness?		If yes, when?	Where did you receive treatment/medical care for this injury or illness?
Yes No			
Have you been in contact with Falck Global Assistance?			
Yes No		File no.:	

Claim for compensation and reimbursement of costs

Fill in information about the costs/expenses you are requesting reimbursement for. The costs incurred must be substantiated with documentation/receipts.

Type of cost	Amount in SEK

Loss of income

Applies only for Personal Injury Protection.

Have you incurred a loss of income due to this accident?		The actual loss of income must be substantiated by an attestation from your employer and a certificate from the Swedish Social Insurance Agency.	Amount
Yes	No		
Employer			
Contact person at the employer		Telephone number	
E-mail address			

Other information

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Insured person's signature

If the injured person is not of age, the claim form must be signed by their parent or guardian.
All the information in this application is provided in good faith. I have read and reviewed the information on the GSR contained in the information appendix.

City and date	Signature
	Printed name

In the Information Attachment on the next page, you can find out more what applies in your case with your injury.



Information appendix

What compensation can be provided?

Only the Personal Injury Protection in the URA insurance applies

Expenses

You can receive compensation for necessary, reasonable, and injured additional costs that are not reimbursed by others. For medical care and treatment, as well as medicines, reimbursement is provided for costs covered by the high-cost protection.

We may compensate certain property that has been damaged in connection with personal injury. Deductions are made for age and use.

Pain and suffering

You can receive compensation for pain and suffering during the acute treatment and healing period. The acute illness period may be considered to have ended even though you are still on sick leave.

Loss of earnings

In some cases, compensation may be paid for loss of earnings. In the event of loss of earnings, we provide compensation for the difference between the salary you would have earned if the injury had not occurred, up to an income base of 7.5 price basic amounts per year, and the compensation you receive from the Swedish Social Insurance Agency and/or your employer. For our calculations, we need a certificate from the Swedish Social Insurance Agency and from your employer.

These rules relating to loss of earnings do not apply to sick leave that is shorter than 31 days.

Medical disability and change of physical appearance

If due to the injury you suffer permanent discomfort or experience a change in your appearance, such as scars, we can assess your right to compensation. An examination of such a claim can be made at the earliest 18 months after the date of injury or the last surgery or concluded treatment.

Dental injury

If you have suffered a dental injury, you may be reimbursed for dental treatment costs incurred as a result of an accident.

In the case of a dental injury, compensation may be paid for the loss of a tooth if the injury resulted in the loss of your own healthy tooth or if it was damaged in such a way that it had to be replaced with a dental bridge or a crown.

Demise

In the event of a personal injury resulting in death, compensation may be paid for funeral expenses, loss of maintenance and special bereavement allowances.

Traffic accident

If you have suffered an injury as a result of an accident involving a motor vehicle, this must be dealt with and settled by the insurer of the motor vehicle.

National Claims Adjustment Board

The National Claims Adjustment Board hears and reviews claims for compensation for personal injury. A review by the Board is mandatory in cases of medical disability of 10 percent or more. In the



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event we do not reach an agreement, you also have the possibility to have the matter examined in the National Claims Adjustment Board.

Other information

Applies to the URA Insurance as a whole

Claims registration

The company uses an industry wide register of insurance claims, the "GSR". This GSR contains certain information regarding losses and the party who requested compensation and is used exclusively for adjusting claims. Accordingly, the company could see if you previously claimed a loss with another insurance company or a governmental agency which handles similar claims for compensation.

The purpose of the GSR is to provide insurance companies and governmental agencies that deal with similar compensation claims a basis for identifying questionable insured losses and compensation claims. In this way, companies and governmental agencies may avoid making payments based on incorrect or false information or multiple payments under several insurance policies for the same loss. The information can also be used in anonymised form for statistical purposes.

The personal data controller for the GSR is Skadeanmälningsregister (GSR) AB, Box 24171, 104 51 Stockholm. Go to www.gsr.se for further information regarding the processing of data which appears in the register.

The Kammarkollegiet's processing of personal data in injury cases

In connection with the processing of your claim for compensation your personal data will be collected and processed.

When we assume the risks of other public authorities in financial terms and their liability for claims, we need to process personal data as part of our work with the settlement of claim for compensation for an injury/loss. The data is processed because it is necessary to perform tasks of a public interest or as an element of our exercise of public authority.

Since we are a central government public authority and are subject to the principle of public access to information, public records/official documents containing personal data may be disclosed if they are not subject to restrictions due to confidentiality.

You have the right to receive information about what personal data we process relating to you and to obtain a transcript of the data containing information about the processing, referred to as a "register extract."

The personal data we process must be correct and accurate. If we process your personal data incorrectly, you have the right to request that the data be corrected and incomplete data supplemented. You also have the right to request the deletion of personal data and/or a restriction on the processing. A public authority's ability to accommodate such a request is limited due to that public authorities are obligated to comply with regulations and provisions concerning public records/official documents and archiving.

For more information about how we process personal data, please visit our website kammarkollegiet.se

If you as a data subject desire to exercise your rights or if you have any questions relating to our collecting and processing of your personal data, please contact the public authority's Data Protection Officer.



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Contact information for the Data Protection Officer:

Kammarkollegiet

GDPR

Box 2218

103 15 Stockholm

GDPR@kammarkollegiet.se

Telephone: 08-700 08 00