

Premium Refund Request Form

Allianz 

Global Assistance

PLEASE COMPLETE IN FULL AND ATTACH ALL REQUIRED DOCUMENTS*

A separate form must be completed for each policy

(* Incomplete request form and/or insufficient documents may cause delay in your refund)

IMPORTANT NOTES:

- Refunds for plans that include Trip Cancellation & Interruption, require proof that all penalties have been waived by the travel supplier.
- Emergency Hospital & Medical Multi-Trip Plans are not refundable after the effective date.
- Refund amount less than the minimum premium will not be issued.
- Refunds will be processed back to the method of payment. Please provide the payee's name and mailing address in the event a cheque has to be issued.

(* Please note required documents may include sensitive personal information. Collection of this personal information will only be used for the purpose to issue a refund.

Insured(s) Name(s) _____ Policy Number _____

Partial Refund Full Refund

PROVIDE THE REASON(S) FOR YOUR REFUND REQUEST:

(Please refer to the Premium Refunds section of your policy booklet for the complete list of valid reasons, limitations, conditions and required documents that apply to your insurance plan.)

CLAIM WAIVER (to be signed by insured)

I/we declared that I/we have not made a claim, nor will I/we made any claims against Policy Number _____.

In consideration of a refund, I/we hereby surrender all rights and privileges that I/we may have pertaining to the above cited

Policy effective date (refund date) MM/DD/YYYY.

I/we consent to the collection of our personal information for the purposes of issuing a refund. I understand I can request my personal information to be deleted at any time by contacting the Privacy Officer at privacy@allianz-assistance.ca

Refund Payable to (please print): _____

Mailing address: _____

Name	Signature	Date completed
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THIS SECTION ONLY TO BE COMPLETED BY TRAVEL AGENT/ADVISOR

Signature of Travel Agent/Advisor

Agency code

Policy number

Refund request forms can be scanned, along with required documents and emailed to Policy Management at refunds@allianz-assistance.ca or by Toll-free fax at 1-866-694-8032.