

Employers Liability - Claim Form

Policy Number

PLEASE COMPLETE THIS DOCUMENT IN BLOCK CAPITALS

Employers Details

Employers Name

Company Name (if applicable)

Postal Address

Business/
Occupation

Telephone (Mobile)

Telephone (Other)

Are you registered
for VAT ?

Yes

No

Email

Contact name and
details for person
our claims
investigator should
contact ?

Injured Employee

Name of injured
person

Married / Single

Address

Age / Date of Birth

Occupation

Is injured person
related to you ? If
so, give details

Was injured person
in your direct
employment or a
sub-contractor

Direct Employment

Sub-Contractor

Give details

How long has
injured person been
employed by you ?

Weekly earnings during
the past 12 months

Accident Details

Date and Time of accident

Where did the accident occur (Place)

Date injured person ceased work ?

Date accident was reported ?

Who was the accident reported

documented ? to ?

Was report

Give full description of accident

What work was the injured person engaged in when the accident happened ?

Was this work part of his/her ordinary duties ?

What training was provided to the injured employee ?

Is there CCTV footage available ?

- Yes
 No

Was PPE supplied to the injured person ?

- Yes
 No

Was PPE being used ?

- Yes
 No

Has this employee had any previous accidents or claims ?

- Yes
 No

If 'Yes' give details

Witnesses

Give names, addresses and contact details of witnesses to incident

Name of supervisor in charge ?

Was the injured person taken to hospital ?

Yes
 No

If yes, state name of hospital.

Did the injured person attend their own doctor ?

Yes
 No

If yes, give name and contact details of doctor.

Did an ambulance attend ?

Yes
 No

Was injured person detained in hospital ?

Yes
 No

If yes, for how many days ?

Has injured person returned to work ?

Yes
 No

If yes, when ?

If back to work, has he/she returned to pre-accident duties ?

Yes
 No

If no, why ?

If not returned to work yet, do you know when they are expected back ?

Has a claim for compensation been made on you for this accident ?

Yes
 No

Are you still paying the injured persons wages ?

Yes
 No

Has the injured person previously received compensation from you or another employer ?

Yes
 No

If yes, give details

Data Protection Notice

Please read the following carefully as it contains important information relating to the details that you give us.

Who are Catalpa?

We are a Managing General Agent in Galway that specialises in providing commercial insurance products in Ireland for our partners around Europe.

Why do we need to collect your personal data?

We require personal information in order to generate a quote/policy that is specifically tailored to your needs. We are also required by law to provide and check certain databases for fraudulent activity (i.e. The E.U. sanctions list)

In order to process a claim – we would require evidence of what occurred and what losses/injuries you may have sustained. In some circumstances, this may include sensitive data.

This information may be shared with other companies in order to meet our legal requirements. (See *Who do we share your information with* Section)

How do we collect information about you?

Primarily, we collect information about you from your broker, who is working on your behalf. On occasion we may also obtain data as follows:

- Receive data from the Injuries Board
- Through Online Searches
- Receive data from someone who is acting on your behalf (i.e. Solicitor)
- Receive data from other Insurers
- Fraud prevention databases

Who do we share your data with?

We may share some of your information with a number of Third Parties

- Legal Professions (to meet legal obligations)
- Loss adjusters, repairers, medical professionals, solicitors, investigators in order to process claims
- The Insurer that underwrites your policy
- The Reinsurer that covers your policy
- Private Investigators
- Fraud prevention Databases

We would also share your data in order to meet any legal obligations (via An Garda Síochána, Courts, or other government agencies that have a legal right to your information)

In order to provide you a policy, we do share your information with the Insurers that would be within the EEA (European Economic Area). This is all done within the GDPR regulations.

How long do Catalpa Keep your information?

All policy information will be held for 7 years after the end of the client/Insurer relationship. Call recordings are held for 8 years. In the event of a claim being notified we would hold onto the information for 18 years to meet our legal obligations. *We only require this information in order to meet our legal obligations and will not use it for any other purposes other than to meet our legal obligations.*

How do you correct the information we have about you?

If you believe the information is wrong about you – please contact us via email or phone and we will try and rectify the issue as soon as possible.

What rights do you have on the information we hold about you?

You may at any time:

- Request us to provide you with the personal information we have on you (in a commonly used electronic format or Hard copy)
- Request us to delete your personal information (please note that this request cannot be done if you have an active policy/claim or if we have legal obligations to hold onto it.
- Request us to transfer your personal information to another company.
- Request us to restrict the use of your information
- Object to the processing of your data

If you wish to request any of the above, please email us a request to dataprotection@catalpa.ie or write to us at our address (see below)

In order to make sure we do not provide your information to another party please provide us with your Name, Address, Date of Birth and any policy IDs/Claims References that you have along with photo identification and Proof of address.

All requests are free of charge and we will try to respond within one month from receipt of the request. If this timeframe cannot be met, we will inform you of this along with the reason this may occur.

Requests to restrict your data may lead to Catalpa being unable to continue to provide an insurance product and/or handle your claim(s) as we have legal obligations to uphold.

What happens if the Data Protection notice changes

This notice will change periodically, so please check it each time you send us personal information or renew your policy to make sure you are aware of everything.

Who do you contact if you have a question on this notice?

If you have any questions on this notice, please contact:

Data Protection Dept.
Catalpa Underwriting Ltd,
First Floor,
Howley Square,
Oranmore,
Galway.

You may also email us at dataprotection@catalpa.ie

If you have a complaint – who do you contact?

If you wish to make a complaint, please send an email to dataprotection@catalpa.ie or write to us using the address above. We will investigate your complaint and respond with the outcome within 30 days.

If you are not satisfied with the outcome, you can lodge a complaint with the Office of the Data Protection Commissioner, Canal House, Station Road, Portarlinton, Co. Laois, R32 AP23.

Declaration

I declare that, as far as I am aware, the information I have given in this document is true. I authorise you, and any solicitor you appoint, to deal with all matters arising from this incident as you see fit and, if appropriate, admit liability or negligence on my behalf.

I am aware that I may appoint an independent loss assessor to act on my behalf and help with the preparation of my claim, but the cost of this assessor will be at my own expense.

Signature

Date

IMPORTANT NOTICE:

Failure to disclose material facts could result in your contract being voided. Material facts are those facts which might influence the acceptance or assessment of your proposal. If you are in doubt as to whether a fact is material or not you should disclose it. Full details of the cover provided appears in the policy document, a copy of which is available on request.