COURT COMPENSATION CLAIM FORM

Claim for unpaid court award compensation

A claim may be submitted if, following an assault, compensation you have been awarded by a court has not been paid within six months from the date of the award. Claims will be considered up to 24 months from the date of the court hearing.

Please complete this form and return it to: - Lincolnshire Police Federation, Police Headquarters, PO Box 999, Nettleham, Lincoln, LN5 7PH

PLEASE COMPLETE THE FOLLOWING: -

| I | hereby certify that on _ | (date) | |
|---|--------------------------|--------------------------|--|
| At | *Ma | agistrates / Crown Court | |
| I was awarded compensation to the amount of £ | | | |
| Against | | (defendant) | |
| in respect of the offence of | | | |
| To date I have received *no / part *Please delete as appropriate | payment of £ | | |
| | | | |
| I therefore wish to claim the sum of £ | | | |
| I enclose a letter from the court confirming the amount of compensation awarded and I understand that if I receive any further reimbursements from the defendant I will repay such amounts to Philip Williams & Co. | | | |
| Signed | Date | | |
| Warrant no: Ran | k: Station: _ | | |
| Home Address: | | | |
| | Post | tcode: | |
| Email: | | | |
| Tel No: | | | |

| BANK DETAILS | |
|--|---|
| When your claim has been approved w Account. | ve will make the payment to you directly to your Bank |
| Please complete the following: - | |
| Name and address of your Bank: | Branch Sort Code:/// |
| | Account Number: |
| | Account Name(s): |
| | |
| | |

| TO BE COMPLETED BY A TRUSTEE OF THE SCHEME: | | |
|---|-------|--|
| I certify that the claimant is a member of the Scheme and that the claim details are correct. | | |
| Date of Joining Scheme:// | | |
| Signed: | Date: | |
| Name: | _ | |

DATA PROTECTION NOTICE

Philip Williams (G Ins) Management Ltd collects and uses your data in accordance with current data protection law (which includes, from 25 May 2018, the General Data Protection Regulation (Regulation (EU) 2016/679)) ("data protection law"). We maintain records in regard to policy claims on computer and/or paper files. Information will only be disclosed to third parties in whatever format is considered appropriate by us. By signing this form, you consent to Philip Williams (G Ins) Management Ltd using your data and the information you have provided to process the claim. Further information can be found in our Privacy Policy at <u>https://www.philipwilliams.co.uk</u>

Privacy Notice

Please Note: Our Privacy Notice can be viewed on our website at <u>www.philipwilliams.co.uk</u> A hard copy can be provided upon request.