Flight Delay

Please provide all relevant information completely and legibly.

Claim Form



American Life Insurance Company (MetLife)

P.O. Box 371916 Dubai, United Arab Emirates T. +971 4 415 4444, F. +971 4 415 4445, Gulflifeclaims@metlife.com

Name of Claimant(s): First	Last name
Policy number:	Date of claim D D M M Y Y Y
Relationship to card member	
Reason for flight delay	
Airline	Flight no. (If applicable)
Expected time of departure	Actual time of departure
Place of departure	Expected time of arrival
Time of arrival	Place of arrival
Type of expenses incurred	
and for whom* (*Please state the name and address)	
Bank details of Beneficiary / Payee required for wire transfer	
Beneficiary / Payee Name	
Beneficiary / Payee Full Address	
Mobile No. Country Code - Area Code - E-mail	
Bank Name	Currency Account
Bank Address	
Bank Account Holder Name	
Bank Account No.	Swift Code
IBAN No.	
I, the undersigned, hereby confirm that all above information is correct and related to my Bank Account.	
Signature	
Need help?	
How to contact us	How to submit the form
Country UAE Kuwait Oman Bahra	in Qatar Any other Country

 Call us
 800 - MetLife (800 - 6385433)
 +965 2 208 9333
 800 70708
 800 08033
 800 9711
 +971 4 415 4555

 Mail us
 P.O. Box 371916, Dubai – U.A.E.

 E-mail us
 Gulflifeclaims@metlife.com

www.metlife-gulf.com

Please send **original** documents to:

Customer Care - MetLife P.O. Box 371916 Dubai – U.A.E.

We are committed to providing you with the highest service standards. If you feel that we have not lived up to these standards we would like to hear about it, so we can put it right for you. Please visit our "Feedback and complaints" page on www.metlife-gulf.com to see how you can get in touch and learn about our Complaints Handling Process.

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Website