

Claim Requirements

1. DEATH CLAIM

1.1 Requirements about the insured

- 1.1.1 PSA/Certified True Copy (CTC) of the insured's Death Certificate with LCR Seal
- 1.1.2 Accomplished Attending Physician's Statement (Death)
- 1.1.3 PSA/CTC of the insured's Birth Certificate
- 1.1.4 Credit Card Statement of Account and Proof of Enrollment (POC)

1.2 Requirements about the beneficiary

Beneficiary	Requirement
Union Bank	Claimant's Statement (Death)
Legal Spouse	Claimant's Statement (Death) PSA/CTC of Marriage Contract <i>For Muslim marriages, Marriage Contract should include attachments with the following information: amount of mahr (dowry); first or subsequent marriage; tafwid, if granted and such other stipulations.</i> PSA Advisory on Marriages of both insured and spouse
Children	Claimant's Statement (Death) PSA/CTC of the children's Birth Certificate
Parent	Claimant's Statement (Death)
Brother/Sister	Claimant's Statement (Death) PSA/CTC of the siblings' Birth Certificate

1.3 Additional requirements for minor beneficiaries.

- 1.3.1 One (1) valid government issued ID with picture and signature of guardian
- 1.3.2 For mentally incapacitated individual over 18 y/o - Neurological Evaluation Form accomplished by the attending physician

Guardian	Minor Beneficiary (if share of minor is P500,000.00 and below)
Parent	Notarized Affidavit of Parental Authority
Grandparent	Notarized Affidavit of Substitute Parental Authority
	Proof of relationship of minor and guardian such as: 1. PSA/CTC of Marriage Contract of parents 2. PSA/CTC of the Birth Certificate of parents
	Proof of death or incapacity of both parents of minor such as: 1. Death Certificates 2. Court Order or similar documents to show incapacity
	Any document to show that grandparent is the guardian of the minor and minor is under the actual custody of the guardian such as: 1. School records/Certification 2. Baranggay Certification 3. Parish Certification 4. Doctor's Certification 5. Certificate of Homeowners Association 6. Affidavit of two (2) disinterested persons and photocopies of ID's of affiants
Sibling	Notarized Affidavit of Substitute Parental Authority
	Proof of relationship of minor and guardian such as: 1. PSA/CTC of Marriage Contract of parents 2. PSA/CTC of the Birth Certificate sibling-guardian
	Proof of death or incapacity of both parents and all grandparents of minor such as: 1. Death Certificates 2. Court Order or similar documents to show incapacity

	<p>Any document to show that sibling is the guardian of the minor and minor is under the actual custody of the guardian such as:</p> <ol style="list-style-type: none"> 1. School records/Certification 2. Baranggay Certification 3. Parish Certification 4. Doctor's Certification 5. Certificate of Homeowners Association 6. Affidavit of two (2) disinterested persons and photocopies of ID's of affiants
Relative	<p>Notarized Affidavit of Actual Care and Custody</p> <p>Proof of death or incapacity of both parents and all grandparents and all siblings (of legal age) of minor such as:</p> <ol style="list-style-type: none"> 1. Death Certificates 2. Court Order or similar documents to show incapacity
	<p>Any document to show that relative is the guardian of the minor and minor is under the actual custody of the guardian such as:</p> <ol style="list-style-type: none"> 1. School records/Certification 2. Baranggay Certification 3. Parish Certification 4. Doctor's Certification 5. Certificate of Homeowners Association 6. Affidavit of two (2) disinterested persons and photocopies of ID's of affiants

If death occurred outside of the country, in addition to the standard claim requirements, please submit the following (whichever is applicable):

1. Embalmer's or Coroner's Certificate
2. Certificate of Cremation
3. Burial Permit
4. Airway Bill
5. Bureau of Quarantine Certificate
6. Marine Protest Report
7. Ship's Passenger Manifest
8. Pictures, Obituary, affidavit of 2 disinterested parties, etc.

If proceeds are payable to the insured's children or siblings by order of preference (there are no designated beneficiaries or beneficiaries predeceased the insured), in addition to the standard claim requirements, please submit the following:

1. Notarized Deed of Extrajudicial Settlement of Estate and Adjudication of Estate duly registered with the Registry of Deeds (A stamp/mark bearing the office of the Register of Deeds of the place where the insured died and which received the Deed of EJS, and the date it was received signifying the acknowledgment by the said office of the submission and filing of the said Deed) which should contain the following information:
 - a. That the decedent left no will;
 - b. That the decedent left no debt;
 - c. Each heir's relationship to the decedent;
 - d. That they are the decedent's only surviving heirs
 - e. An enumeration and brief description of the decedent's properties, both real and personal, which the heirs are now dividing among themselves.
 - f. How the properties are to be divided among the heirs including a specific mention of who will assume ownership and/or of all the benefits
2. Copy of Heir's Bond
3. Proof of publication from the daily newspaper for three consecutive weeks where the Extrajudicial Settlement (EJS) has been published.

All documents coming from abroad should be translated in English and authenticated by the Philippine Consular Office.

Disclaimer: The above documents represent only the standard claim requirements. Additional documents may be required, if necessary, in the evaluation and processing of the claim.

2. DISABILITY CLAIM

2.1. Group Hospital Income Benefit

- 2.1.1. Accomplished Statement of Claim Form - Part 1 – to be accomplished by the insured member.
- 2.1.2. Medical Certificate indicating complete diagnosis and history of illness
- 2.1.3. Original Hospital Statement Of Account reflecting number of days insured was confined in the hospital
- 2.1.4. If disability was due to an accident (Original or Certified True Copy)
 - 2.1.4.1. Final Police report
 - 2.1.4.2. Traffic Incident Report (for vehicular accidents)
 - 2.1.4.3. Sworn Statement of Witnesses
 - 2.1.4.4. Newspaper clippings (if any)

2.2. Group Critical Illness Rider Benefit

- 2.2.1. Accomplished Insured's Disability Form.
- 2.2.2. Accomplished Physician's Statement Disability Form
- 2.2.3. Complete medical records
- 2.2.4. If disability was due to an accident (Original or Certified True Copy)
 - 2.2.4.1. Final Police report
 - 2.2.4.2. Traffic Incident Report (for vehicular accidents)
 - 2.2.4.3. Sworn Statement of Witnesses
 - 2.2.4.4. Newspaper clippings (if any)

If insured resides outside of the country and if accident/disability happened outside of the country, all documents should be translated in English and authenticated by the Philippine Consular Office.

Disclaimer: The above documents represent only the standard claim requirements. Additional documents may be required, if necessary, in the evaluation and processing of the claim.