

Lilliput Surgery

Insurance / Private Paperwork Form

In order to process your paperwork as accurately and quickly as possible, please complete the following questionnaire.

Please ensure any consent forms are signed so that we can share your medical information with the third party. (If you do not complete the relevant information or the consent is not signed your forms may be delayed or not processed in some cases.)

Please note that we do not accept Passport verification forms or naturalisation forms.

Full name and DOB of person paperwork refers to:	
Full address of person paperwork refers to:	
What type of document are you asking the GP to complete?	
Do you think a medical examination is required?	
Is the GP aware of the medical condition you are claiming for?	
Are you going to be collecting the paperwork or have you provided a stamped addressed envelope?	
Have all consent pages been signed?	
Have you completed as much of the paperwork you can / is needed?	
What is the latest date you need this to be completed by? (Please note that in URGENT cases there is a minimum of 3 working days required. If the request is routine / NON-URGENT there is a minimum of a 2 week wait for completion.)	

I understand this is private GP work which attracts a fee and will be invoiced once the paperwork is completed.

Please print, sign, and date the form to show that you have read, fully understand and agree to the details of this form for any paperwork to be completed:

Name (Please print)	Signature	Date

Office use only	Name (Please print)	Signature	Date
Check questionnaire is completed and signed. Paperwork Consent is given/signed			
Check patient is aware of a possible charge			
Check patient aware of wait times			