

PROPERTY INCIDENT REPORT INSTRUCTIONS

Physical Damage to Property

What type of incident should be reported as a Property Incident?

An incident that results in physical damage to asset property, including, but not limited to, potential loss of business revenue and which may result in expenses being incurred outside of normal operating expenses.

What to do once a property incident occurs

- Take immediate action to minimize the loss.
- Protect undamaged property from loss.
- Implement means of capturing all expenses.
- Consult with your engineering/operations/maintenance personnel and outside contractors, if requested, for an initial estimate of the scope and cost of repairs.
- Identify temporary measures needed to resume operations, maintain safety and security and the associated extraordinary expense that will be incurred.
- Take photographs of the damage.
- Appoint one person from your organization to work with the adjuster.
- Cooperate with the insurance adjuster, including providing requested documentation, scheduling of inspections, and other reasonable requests. **Please note: the insurance adjuster must pre-approve scope/pricing of any restoration work for which payment under the policy is expected.**
- **Include Insgroup on all correspondence with the insurance carrier.** If there are any issues of coverage, please notify Insgroup.
- Please note: any claim may be subject to deductible and payment under the policy is only made when the loss exceeds the deductible amount.

Reporting Process

- Complete the report ASAP.
- Send the completed report to claims@insgroup.net.

DISCLAIMER

Please be advised that nothing in this document is intended as, or should be construed as, a grant of coverage under any policy of insurance, an interpretation of any policy language, a legal contract or the provision of legal advice. Please refer to the actual policies for the specific terms, conditions, limitations and exclusions that will govern coverage in the event of a claim. Please contact Insgroup, Inc. with any questions that you may have regarding this Claims Reporting Kit or your insurance policies

Property Claim Report

Location Information:

Location Name/Address:	_____	Phone:	_____
City:	_____	Fax:	_____
State:	_____ Zip: _____	County:	_____
Contact Person:	_____	Email Address:	_____

Incident Information:

Date of Incident:	_____	Time of Incident:	<input type="checkbox"/> AM	<input type="checkbox"/> PM
Reported By:	_____	Title:	_____	
Accident Description:	_____			

Authorities Contacted? (i.e., Police) _____

Time civil authority closed area (if applicable) _____

Remarks & Comments:
