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PTC INSURES

**PTC INSURANCE AGENCY, INC.**

**INSURANCE CLAIMS DOCUMENTATION &  
PROCEDURE**

**Head Office**

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This manual outlines general instructions for the handling of claims against various insurance policies covering the following, among others:

### **General Liability**

Injury to persons (not employees) or damage to property of others as a result of business operations but excluding automobile liability and others that are also specifically excluded.

### **Automobile Liability**

Bodily injury to third parties or damage to third party properties involving the use of an automobile.

### **Loss of or Damage to Automobiles**

Damage to vehicles resulting from accidents including loss of vehicles occasioned by theft but excluding mysterious disappearance. Losses due to acts of god or uncontrollable events such as typhoon, flood, earthquake, tsunami, tornado, etc. are also recoverable from your vehicle insurance.

### **Property, Property In-Transit, Business Interruption**

Damage to owned property caused by fire, lightning, windstorm, hurricane, hail, explosion, riot, civil commotion, smoke, aircraft, land vehicles, theft, vandalism and malicious mischief, and other perils are covered under your property insurance. Properties in-transit and in some cases loss of profit due to stoppage of business as a result of an accident covered by the policy are recoverable from your insurance policy.

### **Death of Insured Employee**

While employees are covered against death, natural or accidental, the claim process may take a while in view of the documentation requirements that are not only voluminous but also challenging. Complications may arise when questions in connection with birth dates, legality of marriage, legal guardians and administrators, third party claims, among others. We will guide you in this exercise and offer you advices in order to facilitate the claim process.

This manual is provided to give you instructions on the reporting of insurance claims and is not intended to answer all questions that may arise out of a particular claim situation. Please read all instructions and adhere to them as closely as possible. If you need assistance of any kind in any situation, call the office of PTC Insurance Agency, Inc.

## **Contact Us**

**Emergency Claims:** +632-2-7798-1111 **Post Office Hours Assist:** +632 917 839 4275

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## Claims Procedure

### What Should I Do in the Event of an Accident leading to an Insurance Claim?

1. Remain calm.
2. Ensure that all persons involved are safe.
3. Call emergency service, if necessary.
4. When third party bodily injury and/or third party property damage is involved, please call the police; when necessary seek medical assistance.
5. Ensure that your property is safe. It is your property and, therefore, it is your responsibility to protect it.
6. Never remove or transfer any part of the insured property unless it is approved by your Insurance Provider or for the purpose of protecting the said property from further damage.
7. Call PTC Insurance Agency, Inc. (or PTC Insurance, for brevity) promptly to alleviate any problems concerning your policy coverage.

Claims involving bodily injury must be reported immediately. In the event that the injured requires immediate medical attention, he or she must be brought to the nearest medical facility for the necessary treatment.

In the above case, a telephone report **must** be done followed by a written report. A police report is extremely necessary.

Claims involving motor vehicle collision or property damage should be made within 36 hours. Notice can be given by telephone or written report. Unless there is bodily injury involved, a police report is generally not necessary. An Affidavit stating the circumstances leading to the accident shall be sufficient.

### What Happens Next?

PTC Insurance will arrange to send a claims adjuster to inspect the damaged property and take statements from those involved and from any witnesses. There is no need to feel threatened by this person. It is his job to gather all pertinent information, assess the extent of loss, determine compensability of the loss under the policy and make recommendations to your Insurance Company. Please extend generously all information this adjuster may request.

If after reporting to PTC Insurance the accident, the adjuster does not contact you within 24 hours, you should inform PTC Insurance immediately.

If someone whom you don't know contacts you about the incident, please let us know. It is our job to ensure a smooth handling of your claim by your Insurance Provider.

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## What Information Do I Need to Provide?

When filing an insurance claim, you are responsible for proving as well as quantifying the loss. In this connection, you will be requested to submit necessary information and documents and should observe the following:

- Assemble immediately information and fill out the appropriate report form provided
- Preliminary information should be sufficient to allow the Insurance Company to take action
- Supplemental information can be submitted later as it is requested
- List of required documents shall be provided

Please see below the type of information and documents that may be required for each type of insurance claim that you may have.

## General Procedure & Preliminary Requirements – Injury to Persons (Not Employees) or Damage to Property of Others

In case of an accident resulting to injury to persons (not employees) or damage to property of others, the following steps should be taken regardless of who appears to be responsible for the incident: (This also applies to third party liability claims for motor vehicles.)

1. Arrange for immediate medical attention as is necessary to persons and/or protect the involved property from further damage.
2. Promptly call PTC Insurance and report the occurrence.
3. Assure any person who intends to file a complaint that the matter will be reported to the Insurance Company, and someone will be in contact with them soon. If pressed, you may tell the claimant to contact PTC Insurance.
4. The following points should be adhered to in case of a loss or there is an indication on the part of the third party to file a liability claim:
  - **DO NOT** discuss insurance details with a claimant.
  - **DO NOT** assume or admit liability or offer to pay any person for loss or damage.
  - **DO NOT** make a statement, written or oral, of accident details except as required by properly identified law enforcement officer or representative of PTC Insurance and/or the Insurance Company.

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5. The same procedure is to be followed for automobile liability claims.

The difficulty in complying with the “**DO NOTs**” while at the same time trying not to incite a claimant unnecessarily is fully recognized. However, either failure of notification as outlined, or violation of the prohibitions set forth may forfeit available insurance coverage. So we must depend upon the diplomacy and tact of every person involved in complying with these instructions.

In order to avoid any complications, we suggest that you advise the claimants that your office is not authorized to handle insurance claims. Advise them further that authorized representatives from the insurance company shall get in touch with them for discussion. Assure the claimants that they will be promptly and fairly dealt with but **do not assume liability or agree to pay**.

## Motor Vehicle Own Damage, Theft Claims

### Claims for damage to or loss of motor vehicle as a result of an accident.

1. Compile the claim documents needed to support a claim;
2. Call PTC Insurance who will call your Insurers and look for a Motor Claims Evaluator, and ask for the nearest Accredited Repair Shop where you can bring your car for a repair estimate;
3. Submit the claim documents directly to PTC Insurance or through the Accredited Repair Shop, whichever you prefer;
4. Letter of Authority (LOA) will be issued to the shop within 3 days from the submission of complete documents. The shop will then inform you of your Insurers' approval;
5. For third-party property damage, do not forget to ask the name and contact number of the third-party. Do not promise or guarantee anything. Let PTC Insurance or your Insurers negotiate with the third party;
6. In case of a third-party bodily injury, immediately for the authorities. If necessary arrange for medical assistance in coordination with the authorities. The, call a Motor Claims Evaluator through PTC Insurance so that an adjuster is assigned, if necessary. If it happened beyond office hours, you may call your Insurers hotline for an adjuster referral. Do not promise or guarantee anything. Let PTC Insurance or your Insurers negotiate with the third party;
7. For carnapping claims, you need to report the loss to Highway Patrol Group (HPG) within 24 hours of the loss.

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### Claim Documents needed to support a claim:

1. Police Report / Accident Report Form / Affidavit;
2. Copy of the Driver's License;
3. Copy of the insured vehicle's Certificate of Registration and Latest Official Receipt;
4. Photos of the damage incurred and repair estimate. This may be secured from an accredited repair shop.
5. Copy of the third-party's driver's license, Certificate of Registration and latest Official Receipt (For third-party property damage)
6. Medical Certificate, hospital bills, official receipts and other documents (For third-party bodily injuries)
7. Complaint Sheet, Alarm Sheet, Certificate of Nationwide Alarm and Certificate of non-recovery from HPG (For carnapping claims)

In case of bodily injury claim, submit documents mentioned above as well as medical certificate, hospital bills and official receipts of payment and other documents that may be required.

In case an advance payment is made for minor injuries, a quit claim form or affidavit of desistance must be signed by the victim. PTC Insurance should be able to provide you the forms.

## Property Damage Claims (Building, Machinery & Equipment, FFF and Inventory)

### Claims Resulting From Fire, Typhoon, Flood, Earthquake, Windstorm, Explosion, Others

**Turnaround Time:** Fifteen (15) Working Days from Submission of Complete Set of Documents

1. Prompt advice is required following any loss covered under the property insurance policy. The initial notification should include information about the date and time of the loss, place of occurrence, nature and extent of damage (i.e. partial or total loss);
2. Protect the property from further damage. Do not remove the debris until the insurer's representatives are finished with their inspection;
3. Upon receipt of the initial notification (verbal or written), your Insurers shall immediately assign an adjuster to attend on the matter. The adjuster is instructed to contact you or PTC Insurance. Soon after it made the contact, the adjuster will proceed to the accident site, investigate, report on the circumstances, determines the extent of damage sustained by the insured property/ies and ascertains compensability of the loss under the policy;

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4. Within 60 days from the date of loss, the Assured must sign and submit A Proof of Loss. A Proof of Loss contains the following:

- Time and origin of the loss
- Location of the affected property
- Nature of ownership of the insured property
- Extent of damage and salvage value
- Liens and encumbrances
- Other insurance covering the property
- All other information relevant to the insured property

5. Submit documents to support the claim.

**General requirements:**

- Sworn Statement about the Fire Claim
- Non-Waiver Agreement
- Affidavit of Loss
- Fire Investigation Report
- Copy of business permit (if applicable)
- Copy of Articles of Incorporation (if applicable)
- Colored photographs of the damaged property taken at the insured location

**Building Claim:**

- Certified copy of the building permit or other documents to establish date construction, repairs or renovation
- Certified copy of the Declaration of Real Property
- Estimated reconstruction cost of the burned building with details and bill of materials prepared by a civil engineer or architect. No contemplated improvements may be included in the reconstruction/ repair cost. The estimate follows the specifications of the building as it was prior to the loss.
- Copy of the approved construction plans and specifications
- Lease Contract/ Agreement (if not owner of land)
- Appraisal Report

**Machinery & Equipment / FFF Claim:**

- Complete list of M&E/ FFF damaged or destroyed showing the cost, date acquired and value of each item at the time of loss
- Purchase Invoices, Delivery Receipts, Supplier's Certificates, importation documents, and all other records pertaining to the affected items

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- Quotations from qualified suppliers
- Appraisal Report

**Stock Claim:**

- Itemized inventory of stocks damaged inside the building showing the net cost (exclusive of profits) of each item, extent of damage, and salvage
  - Certified copies of ITR and FS for (at least) 2 years
  - Books of Accounts, purchase and Sales Invoices, and all other business records.
  - Affidavit stating the location of other stores or warehouses and the amount of insurance on stocks contained therein, if any
6. The Adjuster evaluates the claim.
  7. The insurer processes the claim.
  8. The Assured signs the quitclaim and the waiver of subrogation then receives settlement offer.

## Aviation Claims – Material Damage to Aircraft & Third Party Liability

Claims and losses arising from the ownership, maintenance, or use of aircraft including damage to aircraft and third party personal injury and property damage.

Turnaround Time: Fifteen (15) Working Days from Submission of Complete Set of Documents

1. Immediate notice of any event that is likely to give rise to a claim under the Policy shall be given to the Insurers. After the notice, the Insured shall:
  - Furnish full particulars in writing of such event and forward immediately all letters or documents relating thereto;
  - Give notice of any impending prosecution;
  - Render such further information and assistance as the Insurers may reasonably require;
  - Not act in any way to the detriment or prejudice of the interest of the Insurers.
2. The Insured shall not make any admission of liability or payment or offer or promise of payment without the written consent of the Insurers.
3. The Insurers shall be entitled (if they so elect) at any time and for so long as they desire to take absolute control of all negotiations and proceedings and in the name of the Insured to settle, defend or pursue any claim.

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4. The Insured is required to submit either to the Insurance Company or the appointed independent loss adjuster the following;

#### **General Requirements**

- Air Transportation Office Incident Report
  - Certificate of Airworthiness
  - Certificate of Registration
  - All Flight Crew Licenses and Medical Certificates
5. Copy of Original Policy
  6. Pilot Logbook
  7. Flight Plan
  8. Pilot's Report and/or Operator's Accident/Incident Report
  9. Airport Approach/Departure Jeppesen Plate (if applicable)
  10. Maintenance Schedule Check Periods and Check Data
  11. Photographs

#### **For Third Party Liability Claims**

- Air Transportation Office Incident Report
- Certificate of Airworthiness
- Certificate of Registration
- All Flight Crew Licenses and Medical Certificates
- Copy of Original Policy
- Pilot's Report and or Operator's Accident/Incident Report
- Airport Approach/Departure Jeppesen Plate (if applicable)
- Maintenance Schedule Check Periods and Check Data
- Other Injuries or Third Party Damage
- Photographs

## **Marine Cargo Insurance – Inland and Ocean Going**

Claims for loss or damage to cargo by which the property is transferred, acquired, or held between the points of origin and the final destination.

Turnaround Time: Fifteen (15) Working Days from Submission of Complete Set of Documents

1. In the event of any occurrence which might give rise to a claim under the policy, the Assured shall:

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- Immediately notify the Insurer by telephone as well as in writing, giving an indication as to the nature and extent of loss or damage;
  - Take all steps within his power to minimize the extent of the loss or damage;
  - Preserve the parts affected and make them available for inspection by a representative or surveyors of the Insurers;
  - Furnish all such information and documentary evidence as the Insurers may require.
2. The Assured or any of his representatives shall always make themselves available for a meeting or discussion about the incident.
  3. The Assured is required to submit either to the Insurance Company or the appointed independent loss adjuster the following:

#### **General Requirements**

- Formal Claim against the Insurance Provider
- Formal Claim against Vessel's Agent
- Formal Claim against Arrastre Service (if any)
- Bad Order Certificate (if any)
- Short Delivery / Short Landed Certificate (if any), Commercial Invoice / Packing List, Bill of Lading / Airway Bill
- Broker's Delivery receipt
- Original Policy

## **Marine Hull Insurance**

Claims for accidental loss or damage to boats or marine vessels used for commercial or leisure purposes anywhere in the agreed navigational limits set by the policy. It includes salvage costs, and third party liability cover.

Turnaround Time: Minimum of Ten (10) days from the receipt of the Adjuster's Report (without reinsurance ). However, if the claim is reinsured, approval of said Reinsurers is needed and turnaround time will vary.

1. Promptly advise Hull Underwriters through PTC Insurance of any incident or casualty that may give rise to a claim under the policy. The advice should include the following details:
  - date and time of the incident
  - place of occurrence;
  - nature and extent of known or anticipated damage.

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2. Request the Master to file a Marine Note of Protest (or Marine Protest) and furnish Hull Underwriters a copy thereof. In collision cases, notice must be given to the other vessel holding them responsible for any damage or expense to your vessel.
3. Advise Hull Underwriters of the location of the vessel or its estimated time of arrival (ETA) at the next port. In case of collision, the location or ETA at the next port of the other vessel must likewise be obtained.
4. Hull Underwriters will appoint a hull surveyor to deal with the technical aspects of the claim and approval of accounts.
5. Assign the case to an Average Adjuster who can assist in presenting the claim to the Hull Underwriters, taking into consideration the policy terms and conditions. These must be distinguished from the ordinary loss adjusters. In the Philippines, there are only two (2) firms qualified to practice Average Adjusting licensed by the Office of the Insurance Commission:

Richards Hogg Lindley (Phils.) Inc.  
Suite 303 Marbella II Building 2071 Roxas  
Boulevard  
Malate, Manila  
Tel.: +632 521 1988 to 89 Fax: +632  
521 1987  
PIC: Mr. Henson Lim

Stevens Adjusters, Inc.  
Rm. 1 101 Victoria Building  
429 United Nations Ave.  
Ermita, Manila  
Tel.: +632 523 8621 to 23  
Fax: +632 521 7083  
PIC: Atty. Alex Tiongco

6. Submit through the appointed Average Adjusters statutory certificates, such as:
  - Class Certificate
  - Certificate of Inspection
  - Certificate of Ownership
  - Coastwise Load line Certificate
  - Ship Statutory Licenses
  - Certificate of Vessel Registry
  - ISM Certificates, etc.

to ascertain that the insured vessel complies with warranties stated in the policy.

7. Produce Deed of Sale or other proof of ownership.

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8. Prepare certification that no other insurance has been taken out on the vessel.
9. Submit other required documents to the appointed Average Adjusters (e.g. paid vouchers, repair bills, log books, etc.). It is important to cooperate fully with the Average Adjusters in all matters pertaining to the claim to ensure that it is processed without delay.

The foregoing list is not by any means all-inclusive and additional documentation / information may be requested on a case-by-case basis. However, the above serves as a useful guideline in the event of an incident that may affect your policy.

## **Electronic Equipment Insurance, Contractor's All Risks Insurance, Machinery Breakdown Insurance**

Claims for sudden and unforeseen loss or damage which physically affected the insured equipment such as electronic data processing equipment, office equipment, communication and radio equipment, contractor's equipment and projects in progress and machinery and equipment.

Turnaround Time: Fifteen (15) Working Days from Submission of Complete Set of Documents

1. In the event of any occurrence which might give rise to a claim under this policy, the Assured shall:
  - Immediately notify the Insurer by telephone or telegram as well as in writing, giving an indication as to the nature and extent of loss or damage;
  - Take all steps within his power to minimize the extent of the loss or damage;
  - Preserve the parts affected and make them available for inspection by a representative or surveyors of the Insurers;
  - Furnish all such information and documentary evidence as the Insurers may require; and
  - Inform the police authorities in case of loss or damage due to theft, burglary, or sabotage.
2. The Assured is given sixty (60) days from the date of the loss to submit /render a proof of loss and sworn to by the Assured, stating the knowledge and belief of the time / origin of the loss, amount of loss encumbrances, all other contracts on insurance and all other information related to the Assured properties.
3. The Assured or any of his representatives shall always make themselves available for the inspection of the incident.
4. The Assured is required to submit either to the Insurance Company or the appointed independent loss adjuster the following:

### **A. General Requirements**

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1. Sworn Statement in Proof of Loss
2. Non-Waiver Agreement
3. Detailed Incident Report
4. Photographs

**B. For CAR & EAR Claims**

1. Full copy of the Contract/Agreement
2. Breakdown of the Contract Value
3. Detailed rehabilitation/repair cost estimate for the damaged properties.
4. PERT/CPM &/or Bar Chart (as necessary)
5. Accomplishment Report at the time of the loss (as necessary)
6. Others Technical Plans as necessary (Construction Plans &/or Drawing, As Built Plans &/or Drawings, Structural Analysis and Design, etc.

**C. For EEI, Machinery Breakdown & Boiler / Pressure Vessel Claims**

1. Purchase invoices, delivery receipts, supplier's certificates, importation documents, and all other records pertaining to the damaged equipment.
2. Inventory of damaged &/or affected machinery & equipment showing the new replacement values, dates acquired and models / serial numbers with comments on the extent of the damage.
3. Quotation from qualified suppliers on repair / reinstatement of the affected properties.
4. Witness/es statements (as necessary)
5. Copy of the Engineer's Technical Report with comments as to the probable cause of loss, extent of damage and emergency measure taken.

**D. For Theft & Burglary Claims**

1. Police Report
2. Photographic evidence of the point of entry &/or exit
3. Inventory of stolen &/or missing properties
4. Documentary evidence as proof of loss, e.g. invoices, etc.

**E. For Third Party Liability Claims**

**A. Bodily Injury &/or Death**

1. Doctor's certification regarding the extent of injury
2. Original copies of medical receipts and other related expenses
3. Copy of formal complaint/subpoena if the third party has taken legal action against the Assured
4. Written statements of witnesses

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## **B. Property Damage**

1. Repair cost estimate for the damaged properties.
2. Quotation for the repair.

## **Comprehensive General Liability Insurance**

Responds to claims by third parties for bodily injury and/or property damage as a result of your negligence in the operation of your business.

### **General Guidelines:**

1. In case of loss, the insured shall give an immediate notice to the insurance company or broker / agent.
2. The insured will then receive a corresponding acknowledgement letter from the Insurance Company indicating the next course of action, e.g.
  - a) Submit the claim documents as listed below for in-house evaluation / processing of claim; OR
  - b) An independent adjuster has been appointed to handle the investigation of claim and will shortly get in touch with them to schedule the inspection.
3. Upon evaluation / investigation of the claim, the insured will be notified of the Insurance Company's position.

### **Standard List of Claim Documents Required:**

#### **For Third Party Property Damage Claims**

1. Incident Report from Security Guard or Witness
2. Affidavit of Insured's Driver / Third Party claimant
3. Driver's License w/ O.R. (Insured & Third Party)
4. Certificate of Registration w/ O.R. (Insured & Third Party)
5. Pictures of the Damaged Vehicle
6. Repair Estimate
7. Certificate of No Claim of Third Party from Motor Car Insurer
8. Police Report

#### **For Third Party Bodily Injury Claims**

1. Incident Report
2. Police Report
3. Medical / Doctor's Certificate

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4. Hospital Bills / Statement of Account
5. Doctor's Medicine Prescription
6. Official Receipts (for medicines, professional fees, etc.)
7. Doctor's Diagnosis Report

## Directors and Officers Liability Insurance

Responds to claims by third parties for losses due to wrongful actions of the directors and officers of the organization.

The types of claims settled under the D&O policy are the following:

- Claims due to misrepresentation or non-disclosure
- Claims due to breach of duty
- Employee-related claims
- Claims due to breach of regulations
- Claims due to bankruptcy

### Claim Procedure

1. Immediately or upon knowledge of an incident which will give rise to a claim against the D&O policy, a written advice is sent to the Insurers.
2. Provide information during investigation
3. Insurance company assigns a surveyor or adjuster who will investigate, evaluate, determine compensability and recommend payment or denial to the insurance company
4. Obtain and make available all documents that will be required by the adjuster or surveyor
5. Answer all queries during the claim process

### Claim Documents

1. Claim Form duly filled out and signed
2. Policy copy
3. Investigation report
4. Proof of expenses incurred
5. Court order which stipulates the compensation payable to the third party by the organization
6. Any other documents as needed by the insurance company

D&O claims are usually settled on reimbursement basis wherein the expenses are incurred first and reimbursed by the insurance company after the claim process.

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## Fidelity Guarantee Insurance

Responds to claims for losses as a result of dishonesty by employees.

### General Guidelines:

1. In case of loss, the insured shall give an immediate notice to the insurance company or broker / agent.
2. The insured will then receive a corresponding acknowledgement letter from the Insurance Company indicating the next course of action, e.g.:
  - a) Submit the claim documents as listed below for in-house evaluation / processing of claim; OR
  - b) An independent adjuster has been appointed to handle the investigation of claim and will shortly get in touch with them to schedule the inspection.
3. Upon evaluation / investigation of the claim, the insured will be notified of the Insurance Company's position.

### Standard List of Claim Documents Required:

1. 201 File of the defaulting employee (i.e. application for employment with picture)
2. Certificate of Employment of the defaulting employee including his/her duties and responsibilities and period of employment.
3. Certificate of monies withheld due to the defaulting employee (such as: unclaimed salary, commission, unpaid sick/vacation leaves and other monetary benefits)
4. Audit Report, inclusive of the following attachments:
  - a. DR/PR or Invoices and Checks
  - b. Affidavit of Payment or Customer's confirmation in writing
  - c. Copies of the subsidiary ledgers showing non-posting of payments defalcated by the erring employee
5. Copy of written internal control procedures
6. Affidavit of the person who discovered the loss
7. Copies of all Insured's Inter-Office Memo, Investigation Report
8. Police Report and Statement of Witnesses (if any)
9. Legal documents for filing of Estafa or Civil case against erring employee such as: a. Demand Letter
10. Copy of Affidavit / Complaint and Counter Affidavits/Answers with all Exhibits and Annexes
11. Status of the case files and others

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12. Copy of the policy schedule showing that the involved employee is covered and O.R. for premium payment
13. Copy of admission / confession letter of the defaulting employee.

## Life Insurance – Yearly Renewable Term (YRT), Credit Life (CL) & Mortgage Redemption Insurance (MRI)

Responds to claims as a result of the death of employees, natural or accidental.

### I. For Contestable Claims

1. Claimant's statement to be accomplished by the beneficiary who is 18 years old or above; if below 18, by the guardian
2. Death Certificate with seal and issued by the Local Civil Registrar/NSO (original copy of the Certified True Copy)
3. Birth Certificate of insured  
Substitute Documents:
  - 3.1 Baptismal Certificate
  - 3.2 Government Issued IDs
  - 3.3 Marriage Contract
  - 3.4 Voter's Registration Record
  - 3.5 Birth Certificate of Children
  - 3.6 Other public documents with date of birth of insured
4. Installment Ledger Card or payor's card (for Credit Life/MRI account only-previous and current loan/s – certified / verified as correct by an authorized officer)
5. Specimen signature (For CL/MRI Account)
6. Other supporting documents depending on the beneficiary

Beneficiary	Requirements
Legal Spouse	1 Marriage Contract
Children/Siblings of legal age	1 Birth Certificate 2 Marriage Contract (for married female child)
Children/Siblings below 18 years old: The father must represent the minor; in his absence or incapacity, the mother.	1 Birth Certificate of minor beneficiary
Children/siblings below 18 (orphaned)	1 Affidavit of Guardianship with Undertaking (Format to be provided.)

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Children/siblings below 18 years old and insurance benefit is above P50,000.

1 Court approved guardianship bond

**II. Additional Documents for Contestable Claims(\*)**

1. Attendance Record to establish actively-at-work (for GYRT only)
2. Attending Physician’s Statement
3. Complete Medical Records (admitting history, Clinic/OPD records)
4. Police Report (if cause of death is due to accident/violent death)

(\*) *Contestable claims are those submitted within the contestable period which is normally 2 years from issue date of the policy.*

**III. Additional Documents for Accidental Death/Violent Death**

1. Complete/Final police investigation report
2. Affidavit of Eyewitnesses
3. Traffic Incident Report with sketch,
4. Police Certification whether insured was wearing a helmet at the time of accident (for motorcycle related accident)
5. Copy of Driver’s License (if the insured was the driver)
6. Autopsy report(If cause of death is due to drowning)
7. Operative Record (for dismemberment)

**VI. Other Documents (Only if applicable)**

Requirements	Particulars	Remarks
Affidavit of Discrepancy	With discrepancy in name	Waived for cases with minor discrepancy only and identity of insured/ beneficiary was established from the submitted supporting documents.
Affidavit of Extrajudicial Settlement	Beneficiary void under the law. If no designated beneficiary and beneficiary based on hierarchy are children and siblings	For sum assured P50,000 and above, to require Affidavit of Publication from the Publisher of the newspaper.

The Insurance Company reserves the right to ask for additional requirements if the above-mentioned standard requirements are deemed insufficient in rendering fair and correct judgment on the claim.

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## Our Goals

PTC Insurance's mission, among others, is to obtain adequate insurance coverage for you at the most reasonable cost and provide excellent claim service. We trust that this manual shall serve as an important guide in order to facilitate the documentation of claims, in particular, and the settlement of claims, in general. In addition, we are available for consultation, advices and/or guidance in relation to any claims that are outstanding and/or about to be filed.

## Adjusters

Immediately after notification, the Insurance company will appoint an adjuster (either in-house or an independent adjuster hired on a fee basis) as their representative. Its primary job is to investigate on the cause of loss and determine if such loss is covered under the policy. Thereafter, it will quantify the loss and will make recommendation to the Insurance Company for settlement or denial of claim, as the case may be. It is necessary that he gets a clear understanding about the details of the loss, how it started and affected the property, and how much loss was actually sustained by you.

## Settlement of Claim

The Insurance Code of the Philippines provides that under any policy other than life insurance policy, the agreed loss shall be paid within 30 days from submission of Proof of Loss and ascertainment of loss between the Insured and the Insurer. But if the ascertainment of loss is not made within 60 days after receipt of the Proof of Loss by the Insurer, then the loss shall be paid 90 days after such receipt. Refusal or failure by the Insurer to pay within the time prescribed will entitle the Insured to collect interest on the proceeds for the duration of the delay at the rate of twice the ceiling prescribed by the Monetary Board, unless such failure or refusal is based on the ground that the claim is fraudulent.

## Salvage

Any damaged property which is the subject of an insurance claim (salvage) becomes the property of the Insurance Company as soon as full settlement is made. **Do not** throw out or give away the damaged property. The Insurance Company has the right to repair it or sell it.

A specialist insurance solutions provider



PTC INSURES