

# ***James R. Favor & Company***

## **Fraternity / Sorority Risk Management & Insurance Program**

### ***(Reporting of Claims or Accidents)***

Any loss or claim that may involve the protection afforded by your insurance program should be reported promptly to James R. Favor & Company. Prompt reporting often prevents minor claims from becoming major problems. Failure to report claims promptly violates the conditions of your insurance policy and could result in the insurance company being relieved of responsibility for payment of an otherwise valid claim.

While a telephone call will begin the claim service process, written reports are also necessary and should be forwarded as soon as possible. Once the initial report is received, claims adjustors from the nearest office of the insurance company or independent adjustors from your local community will be assigned as necessary.

We want to again remind all chapters, alumni corporations and individuals about their general duties in the claims area. For guidelines on reporting, providing needed information, and more specific claims procedures, refer by claim type to the respective claims procedures sheets.

Adherence to these claims procedures and compliance with your policy duties is so important that we ask you to take a minute to read some of the "fine print" (see below) from your insurance policy. Please make certain that all concerned parties are reminded of these important duties.

### **YOUR GENERAL CLAIMS DUTIES PROPERTY / LIABILITY / WORKER'S COMPENSATION**

1. **REPORT CLAIMS PROMPTLY.** Contact James R. Favor & Company @ 14466 East Evans Avenue, Aurora, Colorado, 80014. Toll Free (800) 344-7335 – Fax (303) 745-8669.
2. **EMERGENCY MEDICAL TREATMENT FOR INJURED PERSONS.** As necessary, secure appropriate emergency medical attention for any / all injured persons.
3. **IF SUIT IS FILED OR LEGAL PROCESS SERVED.** If suit, legal process, or claim notice is served upon anyone, IMMEDIATELY NOTIFY, and forward copies of the suit materials to: James R. Favor & Company, your organization, and the insurance company claims adjustor.
4. **DO NOT ADMIT LIABILITY, ACCEPT RESPONSIBILITY OR MAKE PUBLIC STATEMENTS.** Your insurance policy requires / provides that no one shall, except at their own expense, make any payment, assume obligations, or incur any expense other than for First Aid. Only the insurance company has the authority to accept responsibility, make payments, repair damages, defend or otherwise settle a claim under the policy.
5. **COOPERATE WITH INSURANCE COMPANY.** Authorize the insurance company to obtain and inspect necessary records and other information. Respond promptly and cooperate fully with the insurance company in the investigation, defense and settlement of all claims.
6. **ASSIST WITH THE INSURANCE COMPANY'S RIGHTS.** As requested, assist the insurance company in the enforcement of any right against any person or organization that may be liable to the insured because of injury or damage to which your insurance applies.

**PLEASE REMEMBER WE ARE AS NEAR AS YOUR TELEPHONE, DO NOT HESITATE TO CALL US  
SHOULD ANY QUESTIONS ARISE WITH RESPECT TO CLAIMS**