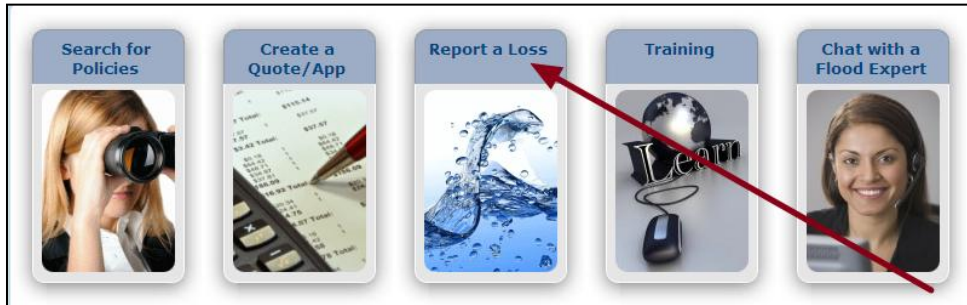


# How to File a Claim

1. Select 'Report a Loss' quick link on the home page or from the 'Policy Summary' screen



2. 'Report a Loss' will navigate to the 'Policy Search' screen

- Enter the policy information and select 'Search'

**Policy Search**  
 To locate a Quote, Application or Policy, select the desired Policy Status (additional search criteria may be entered) and click Search. Results from your search will be shown below. Choose from the available Actions for the appropriate Quote, Application or Policy. To conduct a new search, click 'Clear' to remove the previous entries and enter your new search criteria.

**Policy Search by Insured Information**

Status:

Number:

Insured Name:

Property Address 1:

Property Address 2:

Property City:

Property State:

Property Postal Code:

**Policy Search Results**

Number	Insured Name	Property Address	Status	Policy Type	Effective Date	Action
No records to display						

3. Under 'Policy Search Results', select 'Report Claim' under the 'Action' drop down menu

Number	Insured Name	Property Address	Status	Policy Type	Effective Date	Action
87012345662011	Smith, John	555 Corporate Drive Apt 5A Kalispell, MT 59901	In-Force	Standard	08-23-2011	Select Action
87012345672011	Doe, Jane	555 Corporate Drive Apt 7B Kalispell, MT 59901	In-Force	Standard	08-23-2011	Select Action Cancel Policy Endorse Policy View Summary Report Claim
87012345682010	Adams, Robert	555 Corporate Drive Apt 3D Kalispell, MT 59901	In-Force	Preferred Risk Policy	12-18-2010	

#### 4. Report Notice of Loss Screen

- Notice of Loss Tab: Requires last name, first name, phone number of person reporting loss, date of loss and comments

- Adjusting firm must be selected from the drop down menu
  - The default adjusting firm is listed as the first name on the drop down menu
  - Please note, there may only be one firm listed

- Contact Detail Tab: Please enter 'Temporary Contact Details' for the policyholder
  - An additional phone number is required on this page
  - If an email address is provided, the policyholder will receive email updates on the status of their claim

- Confirmation screen will appear
  - Verify all the information and click on 'Submit'

**Report Notice of Loss Confirmation**

Policy Type: Standard  
 Policy Number: 87046496262010  
 Term: 5-27-2010 through 5-27-2011  
 Insured Name: KEATON, ALEX P  
 Property Address: 328 GRAND AVE  
 SABINA, OH 45169-1017  
 Policy Status: In-Force  
 Work in Progress: n/a

Review Policy, Loss and Contact information entered. Click Submit to send Notice of Loss to Claims Department.


Person Reporting Loss \_\_\_\_\_  
 Name: Keaton, Mallory  
 Phone: (555)555-1234  
 Notice of Loss: 4-14-2011  
 Date Of Loss: 4-13-2011  
 Comment: n/a

Adjusting Firm Information \_\_\_\_\_  
 Name: Epic Adjusting Firm

Temporary Contact Details \_\_\_\_\_  
 Address: n/a  
 Home Phone: (555)555-1234  
 Business Phone: (555)555-1234  
 Temporary Phone: n/a  
 Primary Email: n/a

You have chosen to report a claim on this policy. Please verify the above given information.

Are you sure you wish to report a claim? Yes ▾



- Policy with a previous date of loss
  - A box will appear in red with the date of loss – if this date is within a couple days of the current date, DO NOT ASSIGN AGAIN
- Completed Notice of Loss: Confirms the claims has been reported

[Policy Summary](#) > Report Claim Confirmation

Welcome JONBONJOVI  
 Thursday, April 14, 2011

**Validation Panel**

- Errors
- Warnings
- Information (1)**
  - Successfully created FNL using
  - Submit First Notice Of Loss for claim with assignmentid 19281

**Completed - Notice of Loss**

Policy Type: Standard  
 Policy Number: 87046496262010  
 Term: 5-27-2010 through 5-27-2011  
 Insured Name: KEATON, ALEX P  
 Property Address: 328 GRAND AVE  
 SABINA, OH 45169-1017  
 Policy Status: In-Force  
 Work in Progress: n/a

Notice of Loss has been successfully received by Claims Department.

Please press the Return button below to go back to the Policy Summary screen.