



## **EtchGard Service Department Guidelines And Claim Procedures:**

### **CLAIMS REPORTING AND SETTLEMENT:**

To report a claim, please call the **administrator** toll free at 800-856-0990. The **group member** shall notify the **administrator**, at the address and telephone number listed on the **certificate of coverage**, of a claim for loss within forty-five (45) days of the final primary insurance settlement date.

To recover under this **certificate of coverage**, the **group member** must provide the **administrator** a legible copy of:

- A.) Police Report and recovery report
- B.) **Group member's Primary Automobile Insurance Policy**
- C.) Insurance settlement check
- D.) Original paid receipt(s) for reimbursement **benefit(s)** payable
- E.) Surrender the original **certificate of coverage**
- F.) The **covered vehicle** purchase or lease agreement
- G.) The **replacement vehicle** purchase or lease agreement.

The **group member** agrees to complete all necessary paperwork that the **insurer** requires regarding the reporting of said theft to **insurer**. All adjusted claims for losses shall be paid to the **group member** within thirty (30) days after satisfactory presentation and acceptance of all information to the **insurer**.