

## **Non-motor Insurance Claim Process**

Given below are the essential steps you need to follow to successfully file a claim and get your settlement.

### **Step 1: Claim Intimation**

Notify us as soon as the incident occurs (e.g., accident, hospitalization, property damage).

Provide essential details: policy number, date and time of the incident, the type of claim, and your contact information.

Methods of Intimation:

Call our hotline (0112206306).

Visit your nearest branch office.

Visit our website.

Email [nonmotorclaims@peoplesinsurance.lk](mailto:nonmotorclaims@peoplesinsurance.lk) or send a written notice to Head of Non-motor Claims, People's Insurance PLC, No. 07, Havelock Road, Colombo 05

Why It is Important: Prompt intimation helps start the claims process and ensures that the insurance company is aware of the incident at the earliest possible time. Also the intimation need to be within the time frame stipulated in the insurance policy

### **Step 2: Documentation Submission**

Complete the claim form (provided by us), and ensure it is signed correctly.

Provide the required documents:

Incident-related documents (e.g. incident report, medical bills for health claims).

Additional documents like repair estimates, stock records, hospital discharge summary, police report or any other details which may be required.

Why It's Important: Proper documentation is crucial for us to assess the validity of your claim, determine the coverage and compensation amount.

### **Step 3: Claim Registration**

Ensure that we register your claim once the documents are submitted.

Ask for a Claim Reference Number (Claim Number) for tracking purposes.

For certain claims, a loss adjuster, investigator or surveyor will be assigned to your case.

Why It's Important: The Claim number acts as a reference for you and us to track the claim's progress. It makes the communication process easy.

#### **Step 4: Survey and Investigation (if applicable)**

A surveyor, Adjustor or investigator may visit the site (in case of property or marine claims) to assess the damage or loss.

Provide access to the surveyor and offer them any necessary details.

If it's a health claim, then we may require medical records or a hospital visit to verify treatment details.

Why It's Important: The loss adjuster helps us to assess the extent of the loss or damage, ensuring the correct settlement amount based on policy terms.

#### **Step 5: Claim Assessment**

The insurance company will review all the documents, reports, and surveyor findings.

Wait for the evaluation of your claim, which could include an assessment of the repair costs, medical bills, or the financial loss.

Why It's Important: The insurer needs to verify the claim's legitimacy and calculate the compensation that aligns with your policy coverage.

#### **Step 6: Approval or Rejection**

Once the claim is processed, the insurer will communicate the approval or rejection of your claim.

If the claim is approved, the insurer will provide details about the settlement amount and the next steps.

If the claim is rejected, the insurer will provide reasons and may offer a chance to appeal or submit additional documents.

Why It's Important: Understanding the approval/rejection decision helps you understand if and how you'll be compensated. If rejected, knowing the reasons will help you to address any issues.

## **Step 7: Claim Settlement**

Once approved, the insurance company will process your claim and issue the settlement amount.

The payment could be made:

Directly to you (for personal claims).

To a third party (e.g., hospital, repair service).

### **Tips for a Smooth Claim Process:**

In the event of an unfortunate incident, please take all necessary steps to minimize the loss and extent of damage, and immediately inform your us.

Keep all documents safe: Ensure you have copies of all forms, receipts, and any correspondence related to your claim.

Respond promptly to any requests from us.

If there is a delay, do not hesitate to contact us and check on the status of your claim.

Review your insurance policy before filing a claim, to know what is covered and what is excluded.