

# INSURANCE CARRIER CONTACT LOG

## COMPREHENSIVE CLAIM COMMUNICATION TRACKER

**Claim Number:** 2024-MILTON-78943  
**Policy Number:** HO-3847562  
**Carrier:** Sunshine State Insurance Company  
**Primary Adjuster:** Rebecca Thompson - License #: ADJ-847291  
**Adjuster Phone:** (813) 555-4782 | **Email:** [rthompson@sunshinestate.com](mailto:rthompson@sunshinestate.com)  
**Supervisor:** Mark Williams - Phone: (813) 555-4701  
**Claim Start Date:** October 10, 2024  
**Log Start Date:** October 10, 2024

### CONTACT LOG ENTRIES

Date	Time	Duration	Contact Type	Direction	Person Contacted	Title/Dept	Topic/Purpose	Discussion Summary	P
10/10/24	9:15 AM	12 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Claims Hotline	Initial Report	Report claim	Reported hurricane damage, given claim #, told adjuster would call within 24 hrs	A
10/11/24	2:30 PM	25 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input type="checkbox"/> Out <input checked="" type="checkbox"/> In	Rebecca Thompson	Adjuster	Initial contact	Discussed damage overview, scheduled inspection for 10/14	1
10/11/24	3:45 PM	N/A	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Rebecca Thompson	Adjuster	Send photos	Emailed 47 preliminary damage photos	V

Date	Time	Duration	Contact Type	Direction	Person Contacted	Title/Dept	Topic/Purpose	Discussion Summary	P
10/14/24	10:00 AM	3 hrs	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> In-Person	<input checked="" type="checkbox"/> In	Rebecca Thompson	Adjuster	Property inspection	Complete walkthrough, documented all damage, discussed emergency repairs	R w d a ta
10/14/24	2:00 PM	8 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Rebecca Thompson	Adjuster	Emergency repairs	Confirmed approval for emergency tarping up to \$3,000	C p in
10/16/24	11:00 AM	N/A	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> Email	<input type="checkbox"/> Out <input checked="" type="checkbox"/> In	Rebecca Thompson	Adjuster	ALE forms	Received ALE claim forms and instructions	S re
10/19/24	3:30 PM	18 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Rebecca Thompson	Adjuster	Inspection report	Called for status update, told report delayed due to volume	R 1
10/21/24	4:45 PM	N/A	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> Email	<input type="checkbox"/> Out <input checked="" type="checkbox"/> In	Rebecca Thompson	Adjuster	Initial estimate	Received initial estimate of \$67,845	R re
10/22/24	9:00 AM	35 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Rebecca Thompson	Adjuster	Dispute estimate	Discussed missing items, undervalued repairs	V c e
10/23/24	N/A	N/A	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Rebecca Thompson	Adjuster	Send estimates	Emailed 3 contractor estimates	V s re

Date	Time	Duration	Contact Type	Direction	Person Contacted	Title/Dept	Topic/Purpose	Discussion Summary	P
								averaging \$155,000	
10/28/24	2:15 PM	42 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input type="checkbox"/> Out <input checked="" type="checkbox"/> In	Mark Williams	Supervisor	Estimate dispute	Discussed significant discrepancy in estimates	S re te
11/02/24	10:30 AM	2.5 hrs	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> In-Person	<input checked="" type="checkbox"/> In	Tom Chen	Sr. Adjuster	Reinspection	More thorough inspection with specialty adjuster	R e 7
11/08/24	N/A	N/A	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> Portal	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Claims Dept	N/A	Upload docs	Uploaded additional contractor quotes and engineer report	S c re
11/09/24	4:00 PM	N/A	<input type="checkbox"/> Phone <input checked="" type="checkbox"/> Email	<input type="checkbox"/> Out <input checked="" type="checkbox"/> In	Tom Chen	Sr. Adjuster	Revised estimate	Received revised estimate of \$142,750	C ir p
11/10/24	10:15 AM	22 min	<input checked="" type="checkbox"/> Phone <input type="checkbox"/> Email	<input checked="" type="checkbox"/> Out <input type="checkbox"/> In	Tom Chen	Sr. Adjuster	Payment process	Discussed payment timeline and supplement process	C w d

KEY COMMITMENTS TRACKING

Date Made	Commitment Description	Made By	Position	Due Date	Status	Date Completed	Outcome	Notes
10/10/24	Adjuster contact within	Claims Rep	Initial Intake	10/11/24	<input checked="" type="checkbox"/> Complete	10/11/24	Contact made	Actual called

Date Made	Commitment Description	Made By	Position	Due Date	Status	Date Completed	Outcome	Notes
	24 hours							2:30 PM
10/11/24	Property inspection	R. Thompson	Adjuster	10/14/24	<input checked="" type="checkbox"/> Complete	10/14/24	Inspection done	Arrived on time
10/14/24	Approve emergency tarp	R. Thompson	Adjuster	Immediate	<input checked="" type="checkbox"/> Complete	10/14/24	Approved \$3,000	Verbal approval
10/14/24	Inspection report in 5 days	R. Thompson	Adjuster	10/19/24	<input checked="" type="checkbox"/> Broken	10/21/24	2 days late	Blamed high volume
10/28/24	Reinspection scheduling	M. Williams	Supervisor	11/01/24	<input checked="" type="checkbox"/> Complete	11/02/24	Completed	One day late
11/09/24	Initial payment	T. Chen	Sr. Adjuster	11/14/24	<input type="checkbox"/> Pending	-	-	Awaiting check

DENIALS/DISPUTES LOG

Date	Item/Coverage Denied	Reason Given	Amount Disputed	Response Sent	Status	Resolution	Supporting Docs
10/21/24	Pool cage complete replacement	"Repairable"	\$45,000	10/22/24	<input checked="" type="checkbox"/> Resolved	Approved after reinspection	Photos, contractor statement
10/21/24	Code upgrades	"Not covered"	\$20,700	10/23/24	<input checked="" type="checkbox"/> Resolved	Partially approved \$15,000	Building code documentation
10/21/24	Contents full replacement value	"Depreciation applied"	\$12,000	10/25/24	<input type="checkbox"/> Open	Under review	Purchase receipts provided

## INSPECTION/ADJUSTER VISITS

Date Scheduled	Date Occurred	Type	Adjuster/Inspector	Company	Duration	Areas Inspected	Report Promised
10/14/24 10:00 AM	10/14/24 10:00 AM	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Reinspection	Rebecca Thompson	Sunshine State	3 hours	Entire property	10/19/24
11/02/24 10:00 AM	11/02/24 10:30 AM	<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Reinspection	Tom Chen	Sunshine State	2.5 hours	Roof, structure, pool	11/09/24
11/20/24 2:00 PM	Pending	<input type="checkbox"/> Initial <input type="checkbox"/> Reinspection <input checked="" type="checkbox"/> Expert	Structural Engineer	ABC Engineering	Est. 2 hours	Foundation, framing	11/25/24

## DOCUMENT TRACKING

### Documents Sent to Carrier

Date Sent	Document Type	Description	Method	Confirmation #	Acknowledged	Response Date	Response
10/11/24	Photos	47 preliminary damage photos	Email	Read receipt	<input checked="" type="checkbox"/> Y	10/11/24	"Received, helpful"
10/16/24	Receipts	Emergency tarp invoice \$2,847	Portal	Upload #8471	<input checked="" type="checkbox"/> Y	10/17/24	Approved for payment
10/23/24	Estimates	3 contractor estimates	Email	Read receipt	<input checked="" type="checkbox"/> Y	10/28/24	Supervisor review
11/08/24	Engineering Report	Structural assessment	Portal	Upload #9156	<input checked="" type="checkbox"/> Y	11/09/24	Incorporated in revision
11/10/24	ALE Documentation	Hotel receipts, October	Email	Read receipt	<input checked="" type="checkbox"/> Y	11/11/24	Processing

## Documents Received from Carrier

Date Received	Document Type	Description	Response Required	Response Deadline	Response Sent	Notes
10/11/24	Claim Acknowledgment	Official claim number letter	<input type="checkbox"/> Y	N/A	N/A	Keep for records
10/16/24	ALE Forms	Additional Living Expense forms	<input checked="" type="checkbox"/> Y	Ongoing	11/10/24	Monthly submission
10/21/24	Initial Estimate	First damage assessment	<input checked="" type="checkbox"/> Y	10/28/24	10/22/24	Disputed low amount
11/09/24	Revised Estimate	Second assessment	<input checked="" type="checkbox"/> Y	11/16/24	Pending	Review with contractor
11/09/24	Payment Letter	Initial payment notification	<input type="checkbox"/> Y	N/A	N/A	Check coming

## PAYMENT TRACKING

Date Promised	Date Received	Payment Type	Amount	Check/EFT #	Coverage Applied To	Status	Issues
10/17/24	10/20/24	<input type="checkbox"/> ACV <input type="checkbox"/> RCV <input checked="" type="checkbox"/> Advance	\$3,000	CHK-4782	Emergency Repairs	<input checked="" type="checkbox"/> Cleared	None
11/14/24	Pending	<input checked="" type="checkbox"/> ACV <input type="checkbox"/> RCV <input type="checkbox"/> Advance	\$71,375	Pending	Dwelling - 1st payment	<input type="checkbox"/> Pending	Awaiting
TBD	TBD	<input type="checkbox"/> ACV <input checked="" type="checkbox"/> RCV	\$71,375	TBD	Dwelling - depreciation	<input type="checkbox"/> Pending	After repairs
Monthly	11/15/24	<input type="checkbox"/> ACV <input type="checkbox"/> RCV <input checked="" type="checkbox"/> ALE	\$6,325	Pending	November ALE	<input type="checkbox"/> Pending	Submitted

**Total Paid to Date:** \$3,000

**Total Outstanding:** \$139,750

**Total Disputed:** \$12,000

## IMPORTANT DEADLINES

Deadline Type	Date	Description	Status	Date Completed	Extension Requested	Extension Granted
Proof of Loss	12/09/24	60 days from loss	<input type="checkbox"/> Pending	-	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A
Examination Under Oath	TBD	If requested	N/A	-	N/A	N/A
Appraisal Demand	04/09/25	If needed	<input type="checkbox"/> Pending	-	N/A	N/A
Statute of Limitations	10/09/29	5 years to file suit	<input type="checkbox"/> Pending	-	N/A	N/A

## ISSUES AND CONCERNS

### Coverage Issues

Date Identified	Issue Description	Carrier Position	Our Position	Status	Resolution
10/21/24	Initial estimate 56% below contractors	"Our estimate is accurate"	Multiple contractors confirm higher	<input checked="" type="checkbox"/> Resolved	Reinspection approved higher
10/21/24	Code upgrades coverage	"Limited to 10%"	Policy states 25%	<input checked="" type="checkbox"/> Resolved	Agreed to 25%
11/09/24	Contents depreciation	"ACV until replaced"	Should be RCV upfront	<input type="checkbox"/> Open	Reviewing policy language

### Bad Faith Indicators

- ☒ Unreasonable delays (Initial report delayed 2 days beyond promised)
- ☐ Failure to acknowledge communications
- ☐ Misrepresentation of policy language
- ☐ Failure to conduct proper investigation
- ☒ Lowball settlement offers (Initial estimate 56% below actual)
- ☐ Failure to provide reason for denial
- ☐ Threatening/intimidating behavior
- ☐ Failure to attempt good faith settlement

# ESCALATION HISTORY

Date	Issue Escalated	Escalated To	Title	Result	Follow-Up
10/28/24	Low initial estimate	Mark Williams	Supervisor	Reinspection ordered	Completed 11/02/24
11/12/24	Payment delay	Mark Williams	Supervisor	Pending	Awaiting response

# MONTHLY SUMMARY

## October 2024

- Total contacts: 8
- Promises made: 5
- Promises kept: 3
- Documents sent: 4
- Documents received: 3
- Payments received: \$3,000
- Outstanding issues: 2

## November 2024 (Through 11/15)

- Total contacts: 7
- Promises made: 2
- Promises kept: 1
- Documents sent: 2
- Documents received: 2
- Payments received: \$0 (pending)
- Outstanding issues: 3

# LOG CERTIFICATION

I certify that this log represents a true and accurate record of communications regarding this insurance claim, maintained contemporaneously with the events recorded.

**Maintained by:** Sarah Mitchell

**Last Updated:** November 15, 2024



**Total Entries:** 15

**Days Since Loss:** 37

**Days Claim Open:** 36

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## **IMPORTANT REMINDERS:**

- ✓ Record all contacts immediately after they occur
- ✓ Save all emails and written correspondence
- ✓ Screenshot text messages and online portal communications
- ✓ Request written confirmation of verbal promises
- ✓ Note names, titles, and direct contact information
- ✓ Keep this log updated and backed up regularly

*This document is provided as a customizable template. It does not constitute legal advice or representation.  
This log may be important evidence if disputes arise.*