



Insurance General Policy and Guidelines

A. PROPERTY INSURANCE

I. CAMP PROPERTIES

- a. Not covered are vehicles licensed for use on public roads. Any vehicle owned or leased by our organization **must have additional insurance.**
- b. Row boats or canoes that are out of the water on the premises are not insured.
- c. Properties are not covered under these "acts of God/Nature":
 1. Earth movement; earthquake; landslide; mine subsidence, earth sinking, rising or shifting, volcanic eruptions. However, if earth movement results in **fire or explosion that is then covered.**
 2. Nuclear radiation or reaction.
 3. War
 4. Flood; mudslide
 5. Water of any kind, but **fire caused by this will be covered**

DUTIES IN CASE OF CLAIM:

1. Immediately notify the police
2. Notify the insurance company as soon as possible, through your representative
3. Take steps to prevent further damage (e.g. board up windows, etc.)
4. Record all expenses from damage prevention.
5. Take inventory and stock of what has been damaged.

WILL NOT PAY UNDER ANY CIRCUMSTANCES:

1. Normal wear and tear
2. Rust, corrosion, fungus, decay
3. Infestation or animal damage.



B. GENERAL LIABILITY

EXCLUSIONS:

1. LIQUOR LIABILITY:
 - a. Causing or contributing to the intoxication of any person
 - b. Furnishing alcoholic beverages to anyone under age or under the influence.
2. Slander, oral or written
3. Breach of contract

DUTIES IN CASE OF CLAIM:

1. Notify your insurance representative immediately with the following information:
 - a. Who, what when where, how, and why?
 - b. Names and addresses of injured
 - c. Names and addresses of witnesses
 - d. Were police notified if situation warrants
 - e. Nature and location of any injury or damage
 - f. **EVERYTHING SHOULD BE IN WRITING!!!**

LAWSUITS:

1. Immediately send your insurance representative copies of any demands, notices, summons, or legal papers in connection with the law suit or claim.
2. Do not discuss the situation with anyone without legal counsel's permission.
3. Cooperate with the legal counsel from the insurance company assigned to the claim.
4. Write down all pertinent information rather than trusting your memory.



C. DIRECTORS & OFFICERS
D. PROFESSIONAL, SEXUAL, MOLESTATION
(Both policies have the same guidelines):

DUTIES IN CASE OF CLAIM:

1. Notify your insurance representative immediately with the following information:
 - a. Who, what when where, how, and why?
 - b. Names and addresses of injured
 - c. Names and addresses of witnesses
 - d. Were police notified if situation warrants
 - e. Nature and location of any injury or damage
 - f. **EVERYTHING SHOULD BE IN WRITING!!!**

NOTA BENE:

We have no car/van/truck/boat rental insurance. If you are renting any of the above, you must purchase sufficient insurance for your needs. Please remember that there is a deductible that you will also need to meet if you should have any accident.

E. ACCIDENT AND HEALTH

It is very important that you are aware that the accident and health insurance does not cover benefits from illness, only from accidents!

1. When an accident occurs, medical attention is a priority
2. On every situation there is a \$100 deductible that we responsible for. Maximum medical benefit is \$20,000
3. the form (sample included) must be filled out and sent to your insurance representative **AS SOON AS POSSIBLE** because there is a 30 day clause for reporting to the insurance company.
4. As soon as there are any bills available from the medical facility/doctor, etc., these must be mailed to your insurance representative. Otherwise the claim will not be paid.
5. If immediate medical treatment is not sought, any treatment begun more than 30 days after the incident will not be paid for by the insurance company. They will deny the claim.
6. Dental incidents have a benefit of \$250 per tooth up to a maximum of \$1,000. the dental care must be needed as a direct result of the injury or loss of teeth through an accident. Dental x-rays are excluded form the coverage.



WHAT DO IN CASE OF AN ACCIDENT (INSURANCE REPORTS)

- I. All reports must be given either verbally or in writing to **DANUTA KOZŁOWSKA**. The report must be turned in as soon as possible. The information requested will be as follows:
 - a. In any instance where a claim may be filed, the following information is needed:
 - a. the name of the person(s) involved
 - b. their addresses
 - c. telephone numbers
 - d. other contact details (e.g. email)
 - e. age
 - f. the medical help that was sought
 - g. the diagnosis
 - h. the treatment
 - i. names of any witnesses
 - j. Any bills for medical expenses
 - b. If the report deals with an accident, in addition to the above mentioned information we also request copies of the police reports, possible statements from witnesses, etc. and an other related information that would help us in the claim.
- II. It is very important that in certain cases there is a need for **discretion**. Please do not discuss the "situation" with anyone else within or outside of the organization, except for those in authority.
- III. The reporting process is standard for us all. We need to keep in mind that in order for claims to be settled we need to provide the insurance company with all pertinent information. It is your responsibility to gather this information and to transmit it to **DANUTA KOZŁOWSKA**.

Contact details for Danuta Kozłowska:

Phone (973) 763 7399

Fax (973) 763 7399

E-mail: DanutaKo@verizon.net



JAK ZGŁASZAĆ RAPORT O WYPADKU:

- I. Wszystkie roszczenia ubezpieczeniowe zgłaszane muszą być słownie lub na piśmie do Dh. **DANUTA KOZŁOWSKA**. Roszczenie należy zgłosić jak najszybciej. :
 - a. Potrzebne są następujące dane :
 - a. Imię i nazwisko osoby poszkodowanej
 - b. Jej adres
 - c. Nr. telefonu
 - d. Inne sposoby skontaktowania się (n.p. E-mail)
 - e. Wiek
 - f. Rodzaj udzielonej pomocy medycznej
 - g. Diagnoza medyczna
 - h. Nazwiska ewentualnych świadków.
 - i. Rachunki medyczne
 - b. Jeśli zdarzył się wypadek, który wymagał interwencji policji – oprócz powyższych informacji – proszę przesać kopie raportu policyjnego, relacje świadków, itp. I wszelkie dodatkowe informacje.
- II. W niektórych przypadkach zalecana jest dyskrecja i nie dyskutowanie na temat wypadku ani z osobami z organizacji harcerskiej ani z nikim postronnym..
- III. Proces składania raportu obowiązuje wszystkich. Proszę pamiętać, że pomyślne załatwienie sprawy ubezpieczeniowej zależy od przedstawienia kompletnej dokumentacji i wszystkich faktów towarzyszących wypadkowi. Hufcowy/a zatroszczyć się musi o zebranie kompletnej informacji.

Z Dhną Danutą skontaktować się można

Telefonicznie (973) 763 7399

Faks (973) 763 7399

E-mail: DanutaKo@verizon.net