U.S. ROTARY CLUB AND DISTRICT LIABILITY INSURANCE PROGRAM Incident Handling Guidelines

When an incident occurs, an *Incident Report* must be completed by the Insured U.S. Rotary club/district and sent to Rotary International Risk Management immediately to allow for a proper investigation. The reporting of an incident may or may not lead to an actual compensable claim.

CCMSI, Inc., the third-party claims administrator contracted to handle general liability claims on behalf of PPH National Insurance Co, will handle the incident investigation, evaluation of liabilities, and coordinating of any defenses (when necessary) for an incident. PPH funds the \$250,000 self-insured retention of general liability policy issued by Lexington Insurance Company.

- Incident Reporting Requirements. Complete an Incident Report, as soon as practicable, with as
 much detail as possible, but do not delay the reporting due to lack of information. The Incident
 Report Form can be found on the Gallagher Insight and should be submitted to PPH National
 Insurance Co. at claims@rotary.org or by fax to (847) 556-2147.
- 2. Do Not Make Payments or Promise Coverage. Do not pay any legal or medical costs, assume any obligation or offer/agree to any settlement. Your coverage under the insurance policy may be jeopardized if you voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without the insurance company's consent.
- 3. Do Not Admit Liability.
- 4. Do not try to handle the claim without the assistance of the insurance company.
- 5. Full Cooperation Required in Investigation of Incident. Your full cooperation is required to gather the necessary information needed for a thorough investigation, including details of incident, location of incident, description of injuries and names, addresses and phone numbers of involved parties and witnesses.
- 6. Documents Pertaining to Incident. All documents pertaining to the incident, including contracts, certificates of insurance, demands, notices, summons, or other legal papers, must be forwarded to claims@rotary.org.
- Contact with Claimant or Claimant's Attorney. Any contact (including calls and/or emails) made
 by claimant or their attorney should be directed to the claims adjuster assigned by CCMSI to
 investigate the matter.

Updated: July 2021

U.S. Rotary Club & District Liability Insurance Program Incident Report

Complete and return	c/o Rotary Inte Risk Managem	ernational nent @rotary.org Fax: (84	17) 556-2147		
		Rotary Club/I	District Information		
Rotary Club name & state			Club number		
Name of Rotary club/district point of contact			POC phone # POC email		
		Claimant (inj	ured person/entity)		
Name			Phone numb		
0			Email address Gender		Age
Occupation			Geno	iei	Age
Address					
Has the claimant co	ntacted your club/d	listrict? Yes No	0		
Is the claimant a Ro				er? 🔲 Yes	s □ No
Was the injured pers					
Has a police report I	oeen filed? No	Yes <i>If yes</i> , please	forward a copy to PP	H National	
		Incid	lent Details		ne de la companya de
Date and time of incident		(includ	Incident Location (include venue and address)		
Description	n of incident				
Description of inj	ury/property damage				
Name of event					
Is the event organiz If no, what entity (ie	ed solely by the Ross) organized the ev	otary club/district? [vent?	Yes No		
		Witnes	ss Information		
Witness name			Phone # Email address		
Witness name			Phone # Email address		
			icates/Other Docum		THE STATE OF THE S
	If ves please	any contracts/agree forward a copy to PP	'H National.		
event? Yes N	/district issue or co lo <i>If yes</i> , please forv	ollect any certificates vard a copy to PPH N	s of insurance or ad ational.		ured endorsements for the
Does the Rotary clu	ub/district have any s, please forward a co	other documents recopy to PPH National.	elating to the incide	nt (i.e. phot	os, articles, witness statements)