

OHIO TOWNSHIP ASSOCIATION RISK MANAGEMENT AUTHORITY

CLAIM REPORTING INSTRUCTIONS

TO REPORT A CLAIM - FOLLOW THESE INSTRUCTIONS

For Your:

- ◆ General Liability Coverage
- ◆ Automobile Liability Coverage
- ◆ Law Enforcement Liability Coverage
- ◆ Public Officials Liability Coverage
- ◆ Automobile Physical Damage Coverage
- ◆ Property Coverage
- ◆ Boiler & Machinery Coverage

IMMEDIATELY REPORT ALL SUMMONS AND CLAIMS TO:

PUBLIC ENTITY RISK SERVICES OF OHIO (PERSO)

6500 Taylor Road
Blacklick, Ohio 43004

Telephone: (866) 907-3776 or (614) 729-1600

Fax: (614) 729-6046

IF NOTICE OF SUIT OR INCIDENT IS RECEIVED:

- ◆ Do **NOT** assume or admit responsibility.
- ◆ Do **NOT** reveal your coverage limits of liability.
- ◆ Document your file with reports of all employees/officials involved.
- ◆ Make **NO** statement to anyone except your legal counsel or OTARMA Representative.

BE PREPARED TO INCLUDE WITH YOUR REPORT:

- ◆ Your certificate number.
- ◆ Member name.
- ◆ Member address.
- ◆ Name of department involved.
- ◆ Name and phone number of official to be contacted.
- ◆ The official summons and notice of claim.

KEEP THIS FORM WITH YOUR COVERAGE CERTIFICATE
