

GENERAL ACCIDENT

Comprehensive Inland Transit

An insurance product for cargo owners and/or cargo movers which gives complete protection for merchandise or goods in case of loss or damage caused by accidents, acts of nature, robbery and hijacking; personal accident insurance for the authorized driver and helpers; and protection against legal liability caused by accidental bodily injury or property damage to a third party arising from the use of the delivery truck.

Requirements for Quotation:

- 1. detailed description and full listing of the cargoes to be insured;
- 2. details of conveyance, transit routes and frequency of transit;
- 3.total number of drivers and helpers;
- 4. loss experience for the past 3 to 5 years; and
- 5. required coverage with and without RORO cover.

General Claim Guidelines:

- 1. In case of loss, the insured should notify Pioneer or his broker/agent soonest;
- 2. Pioneer will then inform the insured on how the claim will be evaluated:
 - a. Claim documents may be requested for in-house evaluation and processing of the claim; OR
 - b. For more complex cases, an independent adjuster is appointed to handle the evaluation of the claim. The adjuster will contact the insured to schedule an inspection.
- 3. Once the evaluation process is complete, Pioneer will notify the insured regarding the settlement of the claim.

Claim Documents:

- 1. Incident or Police Report;
- 2. Affidavit of Driver / Helper;3. Delivery Receipts / Sales Invoices/O.R. / P.R.;
- 4. List of Stocks Inventory (before and after the loss);
- 5. Purchase Order;
- 6. Package List;
- 7. Pictures of Damaged Items;
- 8. Bill of Lading or Airway Bill; and
- 9. List of Items Affected / Damaged with respective values

For Third Party Property Damage

- 1. Incident Report
- 2. Medical / Doctor's Certificate
- 3. Hospital Bills / Statement of Account
- 4. Doctor's Medicine Prescription
- 5. Original Receipts (for medicines, professional fees, etc.)
- 6. Doctor's Diagnosis Report

For Third Party Property Damage

- 1. Incident Report from Security Guard or Witness
- 2. Affidavit of Insured's Employee and Third Party claimant
- 3. Driver's License w/ O.R. (Insured and Third Party, if applicable)
- 4. Certificate of Registration w/ O.R. (Insured and Third Party)
- 5. Pictures of the damaged third party property
- 6. Repair Estimate of the damaged third party property

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- 7. Certificate of No Claim of Third Party from Motor Car Insurer (if applicable)
- 8. Police Report

For Personal Accident

- 1. Death, Disablement and Dismemberment: death and medical certificate
- 2. Medical reimbursement: medical certificate, original receipts from doctor and hospital, and doctor's prescription for medicine and supplies

Pioneer Contact Center:

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