



MUSICAL INSTRUMENT CLAIM FORM

Cossio Insurance Agency • 864-688-0121 • Fax: 864-688-0138 • PO Box 188 Simpsonville SC 29681

DIRECTIONS:

1. Complete the enrollment form (all pages) in full by filling in the blue fields.
2. Please fill in all the fields with the correct information.
3. Email to apps@cossioinsurance.com or Fax to 864-688-0138.

INSTRUMENT CLAIM FORM

Name:		Date:
Address:		
City:	State:	Zip:
Email:		
Policy #:		
Orchestra/Symphony/Band Affiliation (if any):		
Description of Instrument Involved:		
Item # on Schedule:	Date Instrument Purchased:	
Purchase Amount:	Date of Loss:	
Repair/Appraisal Shop:	Phone Number:	

Please describe the circumstances of the loss (how, when, where did it occur?):

If the instrument was in the possession of anyone other than the claimant at the time of loss, please provide name, address, and phone number of the individual. Also, please advise why the instrument was in their possession.

Estimated amount of loss:	Policy Deductible:
Signature of Claimant:	Date:

I certify that the information given by me in support of this claim is valid and correct. Please provide the following formation to ensure your claim is processed in a timely manner:

- Completed, signed and dated Claim Form
- Copy of an estimate or repair bill including the name, address and phone number of the repair location
- If the instrument is damaged beyond repair or will cost more to fix than it is insured for, this is considered a totalloss. The repair location that is appraising the damage must note it as a total loss with the amount it wouldhave cost to have the instrument repaired.
- If instrument is lost or stolen, a police report MUST be filed and include missing items and serial numbers
- If instrument is damaged in a fire, a fire report should be submitted
- If instrument is lost in transit on an airline, please provide airline and flight destination along with a copy of allcorrespondence with the airline.

FRAUD WARNINGS

Alaska, Arizona, Delaware, Hawaii, Idaho, Indiana, Louisiana, Maine, Minnesota, New Hampshire, New York, Pennsylvania, Tennessee - Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claims containing any materially false information or conceals, for the purposes of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and may be subject such person to criminal and substantial civil penalties.

Arkansas - Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in state prison.

California - For your protection, CA law requires the following to appear on the claim form: Any person who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

District of Columbia - Warning: it is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida - Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Kentucky - Any person who knowingly and with intent to defraud any insurance company, or other person files a claim for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact, material thereto commits a fraudulent insurance act, which is a crime.

New Mexico - Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

Oklahoma - WARNING: Any person who knowingly and with intent to injure, defraud any or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Texas - Any person who knowingly presents a false or fraudulent claim may be subject to fines and confinement in state prison.