

**CLAIMS CHECKLIST  
(Engineering)**

Documentary Requirements in case of Contractors/ Erection All Risk Claim	
<b>Basic Documents:</b>	
<input type="checkbox"/>	Formal Claim against COCOGEN
<input type="checkbox"/>	Police Report / Incident Report
<input type="checkbox"/>	Photographs
<input type="checkbox"/>	Estimate &/or Actual Repair Cost
<input type="checkbox"/>	Technical Report/Assesment as to the cause of loss
<b>Optional Documents:</b>	
<input type="checkbox"/>	Duly Accomplished and Signed Non-Waiver Agreement
<input type="checkbox"/>	Invoices and/or Receipts
<input type="checkbox"/>	Copy of Contract
<b>Others:</b>	
Documentary Requirements in case of Electronic Equipment Claim	
<b>Basic Documents:</b>	
<input type="checkbox"/>	Formal Claim against COCOGEN
<input type="checkbox"/>	Police Report / Incident Report
<input type="checkbox"/>	Photographs
<input type="checkbox"/>	Estimate and/or Actual Repair Cost / Invoices / Receipts
<input type="checkbox"/>	Technical Report/Assesment as to the cause of loss
<b>Optional Documents :</b>	
<input type="checkbox"/>	Proof of Purchase (Equipment)
<b>Others:</b>	

ENGINEERING

### CLAIMS CHECKLIST (Engineering)

Documentary Requirements in case of Third Party Property Damage Claim	
<b>Basic Documents:</b>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Formal Claim against COCOGEN Photographs of Damaged Units Detailed Estimate Police Report / Affidavit of Loss Accomplished Sworn Statement of claim Accomplished Non Waiver Agreement Demand Letter of the Third party claimant Real Property Tax Declaration Supporting documents of the unit cost/ price per invoice
<b>Optional Documents:</b>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Repair Invoice (if damage is already repaired) Floor Lay-out Copy of Lease Copy of Lease Contract
<b>Additional Documents for Motor:</b>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Certificate of No Claim (for damaged vehicle) Formal Claim of Third Party against Insured OR/CR of Motor Vehicles Driver's License of the owner of the vehicle for identity purposes Original Copy of Certificate of No Claim from their insurer
Documentary Requirements in case of Third Party Bodily Injury / Illness or Health/Death Claim	
<b>Basic Documents:</b>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Formal Claim against COCOGEN Original Copy of Official Receipt of medical expenses Death certificate (for Death Claim) Police Report / Affidavit of Loss Birth Certificate (for Death Claim) Hospital Bill/Statement of Account (if hospitalized)
<b>Additional Documents:</b>	
<input type="checkbox"/> <input type="checkbox"/>	Medical Certificate Post Mortem Certificate
<b>Optional Documents:</b>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Statement of Account (if hospitalized) Copy of driver's license (if due to vehicular accident) Doctor's prescription Admitting history & Physical Examination Vital signs chart Nurse's daily progress notes
<div style="border-top: 1px solid black; width: 50%; margin: 0 auto;"></div> <p style="margin: 0; text-align: center;"><b>Date of Completion of Documents</b> (MM-DD-YYYY)</p>	

