



INFORMATION SHEET - No 1

Frequently Asked Questions

We have prepared these FAQs for policyholders making an insurance claim involving Channel Islands Adjusters.

1. What does my insurance policy cover?

An insurance policy provides cover for the reasonable cost of repairing damage due to a specific or sudden unforeseen event. The policy does not cover general wear and tear or damage due to any gradual event over a period of time or due to lack of maintenance. It's important to note that insurance policies cover the cost of the damage caused by an event and do not cover costs to rectify the actual cause of the damage.

An example of this would be a burst pipe; the policy would cover the cost of replacing the damage caused by the leak, but not the cost to fix the actual leak which caused the damage. Despite this, the policyholder has an obligation to prevent (at their expense) further damage from occurring in order to comply with the terms of the policy, therefore the policy holder remains responsible for rectifying the source/cause of the damage.

2. What is the role of a loss adjuster?

A loss adjuster is an insurance professional who acts on behalf of an insurance company in respect of major and complex claims. The loss adjuster plays a key role in the insurance claims process and is usually the first person you will come in to contact with after your claim is submitted.

The loss adjuster's primary duty is to establish whether the insurance company is liable for a claim under the terms of the policy. Each insurance policy is different and each of our agreements with insurance companies are different, and we will always return to these polices and agreements to ensure that they are adhered to.

Our role is to investigate, quantify, validate, manage and settle claims on behalf of the insurance company. In order to achieve this, our team needs to obtain all the necessary facts to enable the insurance company to determine whether the claim is valid.

3. What does our role look like in action?

If we are appointed to a case, we will make contact with you. Whether we are dealing with a major loss or damage, in 99% of cases, we will need to meet the policyholder to gain more information and/or conduct a site visit. During this process we are seeking to verify:

- that the loss or damage falls within the terms of the insurance policy
- that the policy cover is adequate
- that the amounts being claimed are fair and reasonable
- that all valid items have been included and nothing has been omitted.

The loss adjuster will also establish if there is an identifiable third party which could be pursued to reimburse the policyholder.

Following completion of our initial enquiries, we will issue a report to insurers setting out the details of the claim, including our recommendations to insurers regarding policy cover and payments. That report is issued directly to whichever insurance company we are acting for. We do not issue a copy of our report to the policyholder or their broker.

4. Who pays the loss adjuster's costs?

The loss adjuster's fees are paid by the insurance company for whom they are acting.

5. Is the loss adjusting industry regulated?

Absolutely. All loss adjusters who are employed by Channel Islands Adjusters are members of CILA – the Chartered Institute of Loss Adjusters. The Guide to Professional Conduct, Charter, Byelaws and other information can be found at www.cila.co.uk

6. What information do I need to provide?

Under the terms of your policy, the policyholder must provide all the information we request to substantiate the claim. Any costs or expenses incurred in doing so are the responsibility of the policyholder. This information allows our adjusters to verify any details to the insurers. To avoid problems, it is preferable for the policyholder to obtain approval from the adjuster on the scope of work and costs involved **before** any repairs or replacement is undertaken.

7. Where do I send the information to substantiate my claim?

Please send all the details directly to us. Alternatively, if you prefer, send the details to your broker or insurer, although they will need to then forward the details to us and sending the correspondence to your insurers or broker and not directly to us may delay the progression of your claim.

8. Will other specialists be involved?

Depending upon the complexity of the claim, it may be necessary to obtain an opinion from a surveyor, engineer or another specialist. We will explain the procedure if this is deemed an appropriate way forward.

Please note that we are not project managers acting on your behalf.

9. Who appoints the contractor/specialist?

Instructions must be given by the policyholder, not the adjuster or insurer. We will provide you with a separate detailed Information Sheet on the instruction of contractors/suppliers in respect of insurance claims.

10. How long will it take to settle my claim?

We aim to settle your claim as efficiently as possible within the terms and conditions of your insurance contract. However, various factors will affect the time involved, including completing all necessary enquiries; obtaining comparative quotations; availability of contractors and other professionals and, finally, completing the repairs and receiving the invoices.

11. How long will it take for payment to be issued by insurers?

The issuing of payments by insurers is beyond our control. However, we will confirm to you in writing when our payment report has been issued to insurers and most insurers issue payments within 14-21 days of receiving our reports.

12. Can you arrange for the contractor/supplier to be paid directly by insurers?

The insurance contract is between the policyholder and the insurance company. Generally, under the terms of the policy (which is a legal contract) payments are made directly to the policy holder by the insurance company, following receipt of our report. The policyholder is then responsible for the payment to the contractor and/or surveyor.

Saying that, in certain circumstances insurers *may* be prepared to make a payment direct to a contractor/surveyor on receipt of a signed mandate form. Each case is unique, and we will help to guide the process.

13. Communication

Please contact us by phone, letter or email. Please note that we are a busy office, and our adjusters are mostly out on appointments during the day dealing with claims, many of which are urgent. However, we try to be in the office between 4.00pm and 5.00pm Monday to Friday to make and receive phone calls.

Whilst we are happy to receive emails, these will be dealt with in line with other incoming correspondence/communication (phone calls and letters). Unfortunately, we are often simply unable to respond to emails instantly, but rest assured that we will respond to you as soon as we possibly can.

Please note that visits to our office are by appointment only.

14. Data Protection / Privacy Notice

The information provided to us by you, your broker, your insurers and any other party acting on your behalf in respect of your claim is solely used to enable us to process your claim. We take all reasonable care to safeguard your personal information through security policies and secure business processes. We do not release your personal information to any other company for their marketing purposes.

We will not provide your personal information to any other party without your prior agreement.

We only retain your personal information for the period necessary to process your claim and for the period stipulated by your insurers following the settlement of your claim. If you have any queries about your data and how it is used or stored, please contact our Data Protection Officer.

For full details of the cover provided in respect of your claim please read your policy document.

May 2024