



## GENERAL LIABILITY NOTICE OF OCCURRENCE OR CLAIM

Please send completed form as soon as practicable to:

Claims Associates, Inc.  
PO Box 1898  
Sioux Falls, SD 57101  
Online: <http://claimsassoc.com/assign-a-claim>

Email: [ASBSDclaims@claimsassoc.com](mailto:ASBSDclaims@claimsassoc.com)  
Office Phone (daytime hours): 605-333-9810  
Office Phone (after hours): 888-430-2249  
Fax No: 605-333-9835

Report Date:	Date of Loss and Time:
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### MEMBER INFORMATION

School District Name and Street Address:	
Person at School District to Contact About this Loss (name, phone number, and email):	

### OCCURRENCE

Location of Occurrence Street Address:	
Describe Location of Occurrence if Not at a Specific Street Address:	
Police or Fire Department Contacted and Report Number:	
Description of Occurrence:	

### TYPE OF LIABILITY

Premises: Member is	<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant	Type of Premises:
Owner's Name, Address, Phone, and Email (if not the Member):			
Products: Member is	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Vendor	Type of Product:
Manufacturer's Name, Address, Phone, and Email (if not the Member):			

### INJURED / PROPERTY DAMAGED

Name, Address, Phone, and Email of Injured Person:		Name, Address, Phone, and Email of Injured Person's Employer:	
Injured Person's Age, Sex, and Occupation			
Describe Injury:			
What Was Injured Doing?			
Where Was Injured Taken?			
Describe Property:			

### WITNESSES

Name and Address	Phone No.	Email

Report By:	Reported To:
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### ADDITIONAL COMMENTS THAT MAY BE OF ASSISTANCE IN HANDLING THIS CLAIM:

<b>IMPORTANT ADDITIONAL INSTRUCTIONS:</b> Please send copies of any legal papers, correspondence, or any other documentation related to this matter.
<b>APPLICABLE IN SOUTH DAKOTA:</b> Any person who knowingly and with intent to defraud any insurance company or another person, files a statement of claim 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, subject to criminal prosecution and civil penalties.