CLAIM FORM A

***Rose v. The Travelers Home and Marine Insurance Company* Class Action Settlement**
United States District Court for the Eastern District of Pennsylvania
Case No. 2:19-cv-00977-GJP

Instructions: You must sign and submit this form no later than **May 28, 2020** for each insurance claim you wish to be considered for a monetary payment in the settlement. You may, but are not required to, submit supporting documentation of the dollar amount of claimed rot damage. To receive the larger settlement payment available for claimed rot damage of $2,500 or more, you must submit supporting documentation. All claims are subject to potential audit and dispute by Travelers.

First Name | MI | Last Name

Address

City | State | ZIP Code

Claim Number

Date of Loss: MM – DD – YYYY

Actual or Estimated Cost of Repair of Your Claimed Rot Damage: $.

I declare **under penalty of perjury** to the best of my knowledge and belief that:

(1) The foregoing information is true and correct, including any dollar amount I stated above;
(2) I (or my company) had an insurance claim with Travelers for a loss that included damage caused by or consisting of rot (rot damage) which was denied;
(3) As required under the policy for rot remediation:

i. the rot damage described above occurred while the insurance policy with Travelers was in effect;
ii. all reasonable means were used to save and preserve the property at the time of and after the loss; and
iii. prompt notice of the covered cause of loss that resulted in the rot damage was provided to Travelers.

I request that the insurance claim identified above be considered for a payment in the settlement in *Rose v. The Travelers Home and Marine Insurance Company.*

Signature