

Office of Risk Management 5723 Middlebrook Pike Suite 218 Knoxville, TN 37996 Phone: (865)974-5409 Fax: (865) 974-0936 Email: riskmanagement@tennessee.edu Website: http://riskmanagement.tennessee.edu

IN THE EVENT OF PROPERTY DAMAGE CONTACT THE APPLICABLE DEPARTMENT(S) AS

FOLLOWS: UTPD- security assistance & crime reporting; Facilities Services - building damage and clean up; Environmental Health and Safety - hazardous materials, potential mold etc.; OIT electronic equipment impacted; Risk Management - claims process.

PREVENT FURTHER DAMAGE (e.g. move items from water) and **PRESERVE EVIDENCE** of cause of the loss and damaged items by photographing and retaining all items until Risk Management approval to surplus or discard is obtained.

REPORTING and CLAIM SUBMISSION REQUIREMENTS

WITHIN 24 HOURS or the next business day of the incident and in order to establish your department's claim, you must submit the <u>Incident Report Form</u> and columns 1 and 2 of the **Property Claim Packet – Damaged Property Spreadsheet** to riskmanagement@tennessee.edu or fax to: (865) 974-0936.

Late reporting may result in denial of coverage.

WITHIN 3 MONTHS of the incident or conclusion of theft investigation: you must submit the pertinent documents listed below. Risk Management may modify these requirements for particular claims. Replacement expenditures of stolen items recovered by the police are not eligible for settlement. If your documentation is not received by the 3-month claim deadline date your department's claim will be closed.

DOCUMENTS

Property Claim Packet – Damaged Property Spreadsheet should be used for repaired or replaced University-owned items. Submit the spreadsheet with the following documentation listed by column numbers:

- **3.** Copy of original University purchase documents for damaged items, if replacement involved, as well as photographs. (Hint: the date of these purchases is prior to the date of the loss)
- **4.** Vendor statement indicating the cause of the damage, a description and photos of the physical damage, and that any item replaced could not be repaired and that the replacement is the most comparable available.(Hint: to prove your claim by documenting there was damage caused by the incident and justification that what you spent was the least amount possible). For theft claims, a police report number is required in addition to vendor statement regarding replacement is the most comparable available.
- **5.** Copy of invoices showing repair or replacement. (Hint: the date of these invoices is on or after the date of loss) and proof of payment for all amounts submitted for reimbursement (Hint: the Invoice Summary out of IRIS will show the actual payment)
- 6. Salvage value, if replacement is involved. (Hint: You must address whether there is potential for surplus sale recovery or value for parts you are keeping to determine what amount to deduct for the surplus value. You must retain all items until you seek and receive approval from Risk Management to surplus or discard)

The coverage reimburses the lesser of repair or replacement of covered property damaged by a covered peril, less the departmental/campus deductible. The coverage pays the full value of functionally similar (most comparable- no upgrades or warranties) property.

NOTE: FEMA requires additional forms and information.

Property Claim Packet – Labor Spreadsheet should be used for Non-exempt & Wage University Labor for actual repair. Managerial and exempt labor, fringe benefits and overhead are not covered. The coverage will not cover more than a contractor would charge. Please advise Risk Management once decision has been made to use employee labor. NOTE: FEMA requires additional forms and documentation and may cover non-repair labor.

Property Claim Packet - Extra Expense Spreadsheet should be used for expenses resulting from property damage and necessary for business continuity. Submit this form with a best estimate of costs to Risk Management for discussion regarding possible coverage and required documentation.

PROPERTY CLAIM PACKET - DAMAGED PROPERTY SPREADSHEET

Claim Number: Depa		Department:	Department:			Electronic version of Property Claim Packet is available at http://riskmanagement.tennessee.edu		
DEPARTMENT CONTACT Name, Phone Number & EMail:								
	OMPLETE AND SUBMIT COLUMNS 1 & 2 BELOW TO RISK MANAGEMENTUse columns 3-6 to track and record required documents. (see instructions for what is required) Once column 7 is completed, by 3 month deadline submit with documents labeled with corresponding item #'s to Risk Mgmt.							
	Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	
Item No.	Damaged Property Items	Preliminary repair/replacement cost estimate	Proof of UT ownership and photographs	Vendor statements and photographs	Repair/replacement invoices and proof of payment	Salvage Value - if replacement involved	Final repair or replacement cost	
$\frac{1}{2}$								
3								
4								
5								
6 7								
8								
9								
10								
11								
12 13								
13								
15								
16								
17								
18 19								
20								
Total preliminary cost estimate		Total amount being submitted for coverage						

PROPERTY CLAIM PACKET - LABOR SPREADSHEET

Claim Number:					sion of Property Claim Packet is available p://riskmanagement.tennessee.edu	
DEPARTMENT CONTACT Name, Ph	one Number & EMail:			_		
COVERAGE: Non-exempt and wage employee labor at base hourly rate is covered for actual repair. Managerial and exempt labor is not covered. Coverage will not cover more than a contractor would charge.		NOTE: FEMA	Use multiple lines for multiple days we requires additional forms and documentation a	nd may cover non-repair labor.		Submit once this column is complete
EMPLOYEE NAME	TITLE	DATE	SPECIFIC WORK PERFORMED	HOURS WORKED	BASE HOURLY RATE - not incl. fringe benefits and overhead	TOTAL LABOR COSTS
			Total amount being submitted for	20110H0G0		
			Total amount being submitted for	coverage		

PROPERTY CLAIM PACKET - EXTRA EXPENSE SPREADSHEET

Claim Number:	Department:		Electronic version of Property Cla at http://riskmanagement.					
DEPARTMENT CONTACT Name, Phone Number & EMail:								
Relocation or other extra expense resulting from property dam business continuity may be covered under the Property covera listed below with guesstimate and submitted for discussion wir regarding possible coverage and required documentation.	ge and should be	Use this column to record information ar Risk Management. NOTE: FEMA requires additional forms reimburse extra expenses which are not o	Submit to Risk Mgmt. with this column completed for settlement consideration along with the entire Property Packet workbook.					
EXTRA EXPENSE DESCRIPTION	Preliminary cost estimate	such as extra expenses not resulting from	TOTAL COVERED EXTRA EXPENSES					
Total preliminary estimate		Total amount being submitt	ted for coverage					