

Claim Form

Please read both sides of this claim form before completing it (please print legibly) all forms must be signed and dated.

National Grid Claims Department
1125 Broadway
Albany NY 12204-2505

Claims Email: claimsdept@nationalgrid.com

Claimant Information	
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant
Last Name:	First Name:
House Number and Street Address:	Cross Street:
Town/City or Village:	State and Zip Code:
Business or Company Name (If Applicable):	
(Area Code) Home Telephone Number:	(Area Code) Business Telephone Number:
Account Number:	Email:

Incident Information	
Location of Incident:	Town/City or Village:
House Number and Street Address:	Cross Street:
Date and Time of Loss:	Loss is related to: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Vehicle
Weather Conditions: <input type="checkbox"/> Rain <input type="checkbox"/> Wind <input type="checkbox"/> Lightning <input type="checkbox"/> Snow <input type="checkbox"/> Fair <input type="checkbox"/> Other _____	

Briefly describe the events causing the damage/loss or personal injury.
 If known, include the name of National Grid employees or contractors involved.

List the items damaged: YOU MUST INCLUDE MAKE, MODEL NUMBER and DATE OF ORIGINAL PURCHASE.
 Enclose a written repair bill or estimate for each damaged item. If items are not repairable, enclose a statement from a repairman stating the cost to repair them would exceed the cost to replace them along with a copy of the original purchase receipt or a written estimate of the replacement cost. Depreciation is taken on replacement items.

INSURANCE COMPANY NAME: _____ POLICY NUMBER: _____

Have you made a claim for this loss against your insurance carrier? Yes No

FRAUD STATEMENT REQUIRED BY THE STATE OF NEW YORK: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER 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.

Claimant's Signature: X	Date:
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CLAIM POLICY

In acknowledgment of your claim for damages against National Grid, please complete, sign and, return this form to: **National Grid**, 1125 Broadway, Albany, New York 12204-2505, Attention: Claims Department.

PROVISION OF THIS FORM IS NOT AN AGREEMENT TO PAY FOR DAMAGES

Upon completion of our investigation and the return of this form, you will be contact by a National Grid Claim Representative. Should we not receive your completed form and proofs within 60 days, the file will be closed.

National Grid will not reimburse for injuries, damages, or losses due to service interruptions or service defects (1) induced by wind, ice, lightning, floods, storms and other such phenomena; or (2) arising from causes beyond National Grid's control. Such claims are not individually investigated and are rejected under the premise that they are associated with events or conditions that are beyond the Company's control.

With the exception of weather related claims, each matter is investigated to determine underlying facts. In cases where **National Grid** acknowledges responsibility, claim payments will be made only to the properly identified owners of the damaged property. Payments will not be made to contractors or other agents of the customer engaged in the inspection or repair of damaged property.

Claims relating to damages, injuries, interruptions of service or voltage irregularities which result from acts of third parties, such as contractor dig ups or motor vehicle pole hits, are not paid by **National Grid**.

Claimants are required to furnish copies of repair bills or repair estimates and photos as supporting proof of damages and losses alleged. A final decision will not be rendered until such bills and estimates have been received. Requests for suchproof shall not be construed as an agreement to pay a claim.

National Grid does not engage in the repair of property of others allegedly damaged due to its operation nor will it inspect damaged appliances or goods for the purpose of determining the nature or extent of damage.

Such inspections and repairs must be performed by contractors or agents of the claimant's choice. **National Grid** does not recommend contractors or repair agencies.

National Grid may inspect or appraise damaged property for the purpose of determining fair and reasonable value. Payments will be made based on actual cash value. Waiver of inspection does not constitute agreement as to the fair and reasonable value of the damaged property. Spoiled food, medicine or other perishable merchandise should not be held for inspection but should be inventoried, listed and disposed of according to good sanitary practice.

Claimants have a common law duty to limit damages and minimize losses. Damages arising from a claimant's failure to make repairs and minimize losses will not be reimbursed.

National Grid contractors are responsible for their own operations and carry mandatory liability insurance. Claims relating to contractor activities will be referred to the contractor and its insurer for processing. The claimant will be advised accordingly.

Claims for damages arising from interruption or irregularities in gas or electric service are considered under the terms and conditions of the Schedule for Electric/Gas Service which is on file with and approved by the Public Service Commission of the State of New York, Department of Public Utilities of the State of Massachusetts, and Public Utilities Commission of the State of Rhode Island.

Customers are cautioned not to withhold payment of gas or electric bills pending a decision on claims filed. This practice could lead to a deterioration of the customer's credit rating and could ultimately result in a collection action including the discontinuance of service