

## REQUEST FOR INFORMATION

1. Business Name: \_\_\_\_\_
2. Loss Location: \_\_\_\_\_
3. Please specify whether you are claiming direct physical loss of or damage to real property, personal property, stock and supplies, and/or merchandise. \_\_\_\_\_  
\_\_\_\_\_
4. If you are claiming direct physical loss of or damage to insured property, please explain the nature of that physical loss or damage. \_\_\_\_\_  
\_\_\_\_\_
5. Has there been a confirmed case of COVID-19 at the insured property? \_\_\_\_\_  
\_\_\_\_\_
  - a. If so, please provide all relevant details including, but not limited to, the identity of that person and when that person was present at the insured property. \_\_\_\_\_  
\_\_\_\_\_
6. Has the insured property been tested for the presence of COVID-19? \_\_\_\_\_  
\_\_\_\_\_
  - a. If so, please provide all relevant details including, but not limited to, when the property was tested, which organization tested the property, and any reports prepared by that organization confirming the conclusions of their investigation/testing. \_\_\_\_\_  
\_\_\_\_\_
7. Is your business fully closed? \_\_\_\_\_
  - a. If so, on what date did it fully close? \_\_\_\_\_  
\_\_\_\_\_

## REQUEST FOR INFORMATION

8. Has your business reduced its hours of operation? \_\_\_\_\_

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a. If so, please explain the nature of this partial operation including, but not limited to, whether your business is operating with reduced staff, whether your operation is open for pickup and/or deliveries or any virtual methods? \_\_\_\_\_

b. If so, please advise when the reduction in operation began? \_\_\_\_\_

9. Please advise what is required to resume full operation of your business? \_\_\_\_\_

10. Please advise what is required to resume partial operations? \_\_\_\_\_

11. Has your business received any formal notifications of non-payment or delayed payment of rent from your tenants? \_\_\_\_\_

a. If so, please provide copies of any notifications received with this letter.

12. What is your total estimated loss? \_\_\_\_\_

a. Please separately allocate the amount of your claimed physical damage and business interruption. \_\_\_\_\_

**REQUEST FOR INFORMATION**

13. Has ingress or egress to your business been physically prevented, either partially or totally, and if so, provide an explanation as to how and why?

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14. Is there a state or city order impacting your business operations? \_\_\_\_\_

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a. If so, please provide a copy of the order.

15. Have any suppliers or customers been prevented from providing or receiving goods, services or information as a result of COVID-19? \_\_\_\_\_

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a. If so, please identify the supplier and/or customer, explain how that supplier or customer's property was damaged, and explain how that damage prevented:

i. Your supplier from providing you goods or services, or

ii. Your customer from accepting your goods or services. \_\_\_\_\_

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16. Please provide any additional information relevant to your claim. \_\_\_\_\_

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