

Quick Service Restaurant Program

managed by



CUSTOMER INCIDENT REPORTING PROCEDURES

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RESPONDING TO AN INCIDENT

If a customer claims an injury or illness as a result of being in our restaurant or site, below are recommendations for handling such an incident. While such recommendations may be effective given the circumstances, it should be known that Fortegra does not warrant that the below actions are applicable in any or all instances..

Stage 1 - Incident Response

- 1. Do not admit fault.**
- 2. Treat the customer or potential claimant with respect and sincerity. Upsetting the person will only make the situation worse.**
Call 911:
 - if an injury is life threatening
 - if it is requested by the customer
 - if medical treatment is required

If the customer does not want medical assistance, please note this on the incident form.
- 3. Complete the Customer Incident Report.**
- 4. Obtain a statement from the customer of what happened and provide that information in the incident report. Do not furnish the customer with the incident report, unless the customer requests a copy of their statement. Be objective and do not include your personal opinions in the incident report. Have the customer sign the document at the bottom of the statement.**
- 5. Obtain names, addresses, phone numbers, email addresses, and statements of witnesses. Have each witness sign at the bottom of each of their statements.**
- 6. Take plenty of photos of the area around the scene. Only take photos of the area of incident and alleged defect of complaint.**
- 7. Do not discuss the incident with anyone except an investigating officer, authorized company representative or claims representative of Fortegra.**
- 8. Do not furnish any information about your insurance policy except for the name of your insurer, if asked by the customer.**
- 9. Communicate the incident to your immediate supervisor and/or owner of business.**
- 10. Maintain the video for the incident. Save and store video footage from the time the customer arrives and leaves the property. This should be done as soon as possible.**
- 11. The incident should immediately be reported to Fortegra claims department either directly from the company or through your insurance agent depending on your company policy. Even if you do not think there may be a claim, still report.**

Stage 2 - Data Collection

The owner, manager or employee in charge should proceed with the following to ensure all information related to incident at your place of business.

INVESTIGATE

- Obtain all facts related to incident
- Be objective
- Do not include personal opinions

DOCUMENT

- Document all your investigation results
- Complete customer incident report
- Do not give a copy of this report to customer

SECURE

- Secure video footage, if available.
- Make a copy of the video from time arriving and leaving premises include, date, time, and address)
- Take photos of the incident area

CUSTOMER INCIDENT REPORT

Instructions: The manager or employee on duty is responsible for completing this report in the event a customer claims injury while on company premises. Complete all sections and **WRITE CLEARLY (PRINT)**. This report is company property and a copy is not to be given to the customer.

SECTION 1 SITE/STORE INFORMATION

Company Name			Company contact name		
Store No.	Store Phone No.	Store Street Address	City	State	Zip Code

SECTION 2 CUSTOMER INFORMATION

Name (Last)		(First)			
Street Address			City	State	Zip Code
Home Phone Number		Mobile Phone Number		Home Phone Number	

SECTION 3 BODILY INJURY INFORMATION

Customer injured by	Self-Inflicted	Staff member	Other member	
Type of Injury	Abrasion/Scratch Contusion/Bruise	Fracture/Break Laceration/Cut	Sprain/Strain Other:	
What body part does the customer claim was injured? Check all that apply.	Arm Back Buttock	Chest Foot/Ankle Hand/Finger	Head Leg Mouth/Teeth	Thighs Torso/Stomach Area Other
Type of customer foot apparel	Boots Flats	Flip Flops Heels	Sandals Slippers	Sneakers Other
Condition of footwear	Poor	Good	Excellent	Worn

SECTION 4 SITE/STORE INFORMATION

Date	Exact location of the claimed incident			
Time	Entering Facility Outside of Facility	Inside of Facility Parking Lot	Exiting Facility Other:	
Was emergency medical response necessary?	yes	no		
Was police response necessary? If so, send police report upon receipt.	yes	no		
Police report number, if available	yes	no		
Is video surveillance of incident available?	yes	no		
Were photo(s) taken of the scene?				
Weather conditions	Clear Foggy Cluttered	Icey Rainy Graveled	Snowy Sunny Oily	Windy Other (explain) Uneven
Walking surface at the scene of the incident	Dry Icy	Matted Obstructed Path	Pothole(s) Snowy	Wet Other (explain)
Brief description of incident				

WITNESS NAME CONTACT INFO ADDRESS, CITY, STATE EMPLOYEE

	Phone:		yes	no
	Email:			
	Phone:		yes	no
	Email:			

SIGNATURE

Report completed by	Date
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CLAIMS REPORTING PROCEDURES

Claims Reporting – Contact Information

Dedicated adjuster to both the Fortegra, BOP program and the Trisura Hospitality Program

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24/7 Claims Reporting Hotline: **(877) 800-0311**

We have a dedicated email address to report new losses: claims@origin-specialty.com

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