

# CLAIM FORM

## Lion City Run-Off Private Limited

The numbers at the head of the columns correspond to the numbered instructions contained on the page following this form. You should read the instructions carefully. Failure to follow them may result in a claim being rejected. You must provide a breakdown of your calculations showing figures by individual Scheme Insurance Contract, by currency and by loss. Failure to do so may result in your Claim Form being deemed invalid.

A separate Claim Form should be completed for each currency using photocopied pages as required.

SCHEME CREDITOR NAME:.....

CURRENCY:.....

(1) Insurance Company Reference Number	(2) Policy Period	(3) Broker	(4) Signed Line (%)	(5) Loss Description	(6) Agreed Losses	(7) Notified Outstanding Claims	(8) IBNR Claims	(9) Security Interests, Cross-Claims, Letters of Credit, and/or Set- Off	(10) Total (6+7+8-9)
<b>Total</b>									

DATE:.....

ADDRESS:.....

SIGNATURE:.....

.....

POSITION/CAPACITY:.....

E-MAIL ADDRESS:.....

## INSTRUCTIONS FOR COMPLETION OF THE CLAIM FORM

Claim Forms must be returned to: Scheme Manager, Omni Whittington Asia Pacific Pte. Ltd, 1 George Street #16-03, One George Street, Singapore 049145.

Marked for the attention of : Andrew Ian Campbell

Please note that the defined terms used within these instruction and in the Claim Form bear the same meanings as given to them in the Scheme.

The numbers below refer to the numbered columns in the Claim Form. If in relation to a Scheme Insurance Contract you have any Scheme Claims in more than one currency, please photocopy the table and use a separate table for each currency, specifying the relevant currency in the space provided. If there are insufficient lines for any one currency, please photocopy the table and complete the photocopy.

The deadline for submitting completed Claim Forms is the Claims Submission Date, being 12.00 midnight Singapore time (5.00 pm British Summer Time) on 31<sup>st</sup> August 2006 the Claims Submission Date. Returned Claim Forms must reach the Scheme Manager on or before this date. If a Scheme Creditor does not complete and return a Claim Form to the Scheme Manager by the Claims Submission Date, that Scheme Creditor's Scheme Claims will be determined by the Scheme Manager who will allocate to such a Scheme Creditor any amounts standing to the credit of the Scheme Creditor in accordance with the accounting records of the Company in respect of a Scheme Claim by way of Agreed Loss Claims but shall not take into account or attribute any value to Notified Outstanding Claims or IBNR Claims.

### 1) INSURANCE COMPANY REFERENCE NUMBER

This reference is usually found on the cover note or insurance policy under the security or policy schedule section. Please provide a copy of the policy document or cover note for each reference where a Scheme Claim is being made. If you are unable to provide this information please contact your Broker in order to obtain the relevant policy documentation prior to submitting the Scheme Claim Form.

### 2) POLICY PERIOD

Please specify the date when the liability of the Company under each Scheme Insurance Contract incepted and expired. In the case of continuous Scheme Insurance Contracts or Scheme Insurance Contracts of more than 12 months plus odd time, each annual renewal should be shown as a separate Insurance Contract. Any amendments to the original policy period should be supported by the appropriate endorsement(s).

### 3) BROKER

Please specify the name of the Broker who placed the Scheme Insurance Contract or, if the placing Broker is not known, any other Broker or intermediary (if known) who acted on your behalf in relation to the Scheme Insurance Contract. Please enter, in addition, either "Placing" or "Other" as applicable.

### 4) SIGNED LINE (%)

Please specify the proportion of the risk written by the Company.

### 5) LOSS DESCRIPTION

Please specify brief details regarding the exact nature and location of the loss(es) including date(s) of loss or Scheme Claim(s) made.

**6) AGREED LOSSES**

Please specify the amount of the Company's share of any Scheme Claim or (where there is more than one Scheme Claim) of the aggregate amount of any Scheme Claims you have arising under each Scheme Insurance Contract or reinsurance contract underwritten by the Company in respect of losses suffered by a Scheme Creditor which are certain in amount, or liabilities of the Scheme Creditor in respect of losses suffered by a third party which are certain in amount and which either have been paid or are due and payable by the Scheme Creditor. You should provide supporting information for each Scheme Claim. In the case of a Scheme Claim arising under a contract of reinsurance or retrocession, this should include a loss bordereaux certified by the leading underwriter and/or copies of loss reports from your policyholder/cedants or their legal representatives. In all other cases, this should include a loss adjusters report or similar.

**7) NOTIFIED OUTSTANDING CLAIMS**

Please specify the amount of the Company's share of any estimated Scheme Claim or (where there is more than one Scheme Claim) of the aggregate estimated amount of any Scheme Claim, arising under each Insurance Contract underwritten by the Company in respect of losses incurred by a Scheme Creditor and of which the Scheme Creditor is aware or Liabilities of a Scheme Creditor to a third party in respect of losses which have been notified to the Scheme Creditor but which in either case have not yet become Agreed Losses. You should furnish supporting information for your estimate, which in the case of a Scheme Claim arising under a contract of reinsurance or retrocession should include the loss bordereaux certified by the leading underwriter and/or copies of the loss reports from your policyholders/cedants or their legal representatives. In all other cases this should include a loss adjuster's report.

**8) IBNR CLAIMS**

Please specify the estimated amount of the Company's share of any Scheme Claim or (where there is more than one Scheme Claim) of the aggregate estimated amount of any Scheme Claim, arising under each Scheme Insurance Contract underwritten by the Company in respect of losses of a Scheme Creditor, or Liabilities of a Scheme Creditor in respect of losses of another party, for which the Company would be liable to indemnify a Scheme Creditor pursuant to a Scheme Insurance Contract and which at the Ascertainment Date had been incurred but had not been reported. You should provide supporting evidence for each Scheme Claim which in the case of a Scheme Claim arising under a contract of reinsurance or retrocession should include cumulative data triangles of paid loss data, and/or of incurred loss data and/or of incurred loss ratios together with any relevant actuarial reports. In all other cases supporting evidence should include statistical evidence in support of any future developments of Scheme Claims. If you are in any doubt please refer to the Statement of Actuarial Methodology at Appendix F of the Explanatory Statement.

**9) SECURITY INTERESTS, CROSS-CLAIMS, LETTERS OF CREDIT AND/OR SET-OFF**

Please specify the amount of any Security, Set-Off or Cross-Claim which you have in relation to each Scheme Insurance Contract under each Scheme Claim and which is available in respect of such Scheme Claim. Provide an analysis of the amount and provide any supporting documentation, including bank references in respect of Letters of Credit. In the event that the relevant Set-Off, Cross-Claim, Letter of Credit or Security Interest item arises under or relates to an insurance, reinsurance or retrocession contract which has not already been included on the Claim Form, please provide separate details of the relevant contract including the contract reference number, the inception date, broker, broker reference and a breakdown of the amount of the Cross-Claim.

**10) TOTAL**

Please enter the total of columns (6), (7), and (8) less (9) for each Scheme Insurance Contract. Enter the total sum of column (10) at the foot of the column in the box marked "Total".

**A dedicated helpdesk has been established to assist Scheme Creditors. The helpdesk is accessible by e-mail at [LionCityRun-Off@omniwhittington.com](mailto:LionCityRun-Off@omniwhittington.com) (marked for the attention of Andrew Campbell) or by telephone between the hours of 9.00 am. and 5.00 pm. Singapore time (2.00 am. to 10.00 am Greenwich Mean Time) on +65 65117000.**