

THE PREMIER INSURANCE COMPANY OF MASSACHUSETTS  
**REPAIR CERTIFICATION FORM**

**WORCESTER OFFICE** - One Chestnut Place, 10 Chestnut Street, Suite 300, Worcester, MA 01608-2898

**DANVERS OFFICE** - Northwoods Business Park, 199 Rosewood Drive, Danvers, MA 01923

**FALL RIVER OFFICE** - 99 South Main Street, PO Box 71, Fall River, MA 02722-0071

(Please return to the appropriate office above upon completion of repairs.)

INSURED: \_\_\_\_\_

CLAIM NO.: \_\_\_\_\_ DATE OF ACCIDENT: \_\_\_\_\_

Dear Policyholder:

Enclosed is our appraisal for the cost of repairing your automobile and a list of every registered auto body repair shop in the county. We have either enclosed our check or we will send it within five (5) business days. We do, however, reserve the right to withhold payment for a period of time reasonably necessary to investigate any claim before authorizing repair work or making payment on such claim.

Please carefully read the explanation of your rights and duties regarding the repair of your vehicle. The explanation appears on the next page. **In addition, please complete the bottom half of this form as soon as repairs to your vehicle have been completed or if you have decided not to repair your vehicle at this time.** Please note that if we do not receive this form, we will assume that you have chosen not to repair the vehicle in which case the actual cash value of the vehicle will be reduced by the amount of the claim payment plus any applicable deductible.

**CERTIFICATION OF REPAIRS**

*(Please Check One)*

\_\_\_\_\_ I certify that my damaged vehicle has been repaired by:

Repair Shop Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ I have chosen not to repair my vehicle at this time.

Signature of Policyholder \_\_\_\_\_ Date \_\_\_\_\_

**COMPANY REINSPECTION** *(For Company Use Only)*

*(Please Check One)*

\_\_\_\_\_ Repair Work Completed \_\_\_\_\_

\_\_\_\_\_ Other (explain) \_\_\_\_\_

\_\_\_\_\_

Licensed Appraiser \_\_\_\_\_ Date \_\_\_\_\_

## **AUTO DAMAGED? HERE ARE YOUR OPTIONS!**

If you intend to repair your damaged auto, you may select one of the following options:

1. You may choose a referral shop highlighted on the enclosed list. If you do, we will guarantee the materials and workmanship of the repair and the cost to you will usually not exceed our payment plus the amount of your deductible. You are responsible for any costs resulting from the use of parts that are of better quality than the parts that were on your auto at the time of the accident. (Referred to as betterment or depreciation on the appraisal.)

### **OR**

2. You may choose any other registered auto repair shop on the list. We do not guarantee the quality of repairs at other shops, but a registered shop has posted a bond for the protection of its judgment creditors and may provide you with its own warranty. If the shop charges you more than our payment plus the amount of your deductible for the repairs, we will negotiate with that registered repair shop, but we cannot promise that we will pay the difference. You are responsible for any costs resulting from the use of parts that are of better quality than the parts that were on your auto at the time of the accident. (Referred to as a betterment or depreciation on the appraisal.)

### **OR**

3. You may choose not to participate in our Direct Payment/Referral Plan by returning the check to us and then have your auto repaired in accordance with Completed Work Claim Form procedure. Please see your auto policy for details.

If you do not intend to repair your damaged auto:

- You may choose to cash our check and not repair your auto. In this case, we will reduce the actual value of your auto by the amount of our check plus the amount of your deductible. If you later give us proof of proper repair, the actual cash value will be increased. We have a right to inspect all repairs.

If you or your chosen repair shop dispute the accuracy of the appraisal or our payment to you, the following applies to you, referral shop and other registered repair shops:

- You or the repair shop must notify us by telephone or in writing if the cost of repair is expected to exceed our payment plus the amount of your deductible. The notice must be received by us prior to the completion of repairs; otherwise, the additional cost may not be paid. We will evaluate the request and either authorize or deny any supplemental payment. You must allow us to inspect your auto.

Sometimes there may be a disagreement as to the amount of the money we owe for losses or damage to your auto. If so, Massachusetts General Laws, Section 191A of Chapter 175, provides for a method of settling the disagreement. Either you or we can, within 60 days after you file your proof of loss, demand in writing that appraisers be selected. The appraisers then follow a procedure set by law to establish the amount of damage. Their decision will be binding on you and us. You and we must share the cost of the appraisal.