



# ML RESEARCH GROUP

\* 2322 S. McClintock Drive, Tempe, Arizona 85282 \* Toll Free (800) 253- 9022 \* Fax (480) 237-1179 \*  
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## REQUEST FOR TRACING INSURANCE POLICY INFORMATION FORM

PLEASE COMPLETE THE FORM BELOW AND SUBMIT IT VIA EMAIL (NEWREQUEST@MLRESEARCHGROUP.COM) OR FAX (480-237-1179). IF AVAILABLE, INCLUDE ANY ACCIDENT REPORTS AND INSURANCE LETTERS. IF REQUESTING AN UMBRELLA POLICY PLEASE PROVIDE THE INFORMATION FOR THE UNDERLYING POLICY, INCLUDING THE LIMITS THERETO.

**\*\* (Asterisks indicate required fields. Please ensure all fields are completed prior to submission) \*\***

**TYPE OF TRACE(S) REQUESTED** (Pricing dependant upon the Date of Loss & Service(s) Requested. Please refer to our Fee Schedule.):

Rush Service Requested?

SUPER Rush Service Requested?

Policy Existence   
(\$25 Processing Fee Applies)

Policy Liab. Limits

Policy Number

Umbrella Existence & Limits   
(\$25 Processing Fee Applies)

**REQUESTOR'S DETAILS:**

**\*\*Request Date:** \_\_\_\_\_ **\*\*Law Firm:** \_\_\_\_\_

**\*\*Attorney Name:** \_\_\_\_\_ **Contact/Paralegal Name:** \_\_\_\_\_

**\*\*Street Address:** \_\_\_\_\_

**\*\*City:** \_\_\_\_\_ **\*\*State:** \_\_\_\_\_ **\*\*Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **\*\*Telephone:** \_\_\_\_\_ **\*\*Fax:** \_\_\_\_\_

**\*\*Date of Loss:** \_\_\_\_\_ **\*\*Your Client/File Name:** \_\_\_\_\_

**Type of Case:** (i.e. auto, dog bite, slip & fall, assault, product, malpractice, etc. Please explain the nature of the case)

**TYPE OF COVERAGE BEING SOUGHT:** (Please Include Accident Reports and Insurance Acknowledgement Letters if Available)

Auto  Business Auto  UM/UM  Umbrella (Include Name of Primary Carrier and Limits)

Homeowners  Renters  Premises  Business/Commercial General Liability (CGL)

Product  Employment Practices Liability Insurance  Directors & Officers

Errors & Omissions  Professional Malpractice  Other  \_\_\_\_\_

**DETAILS ON INDIVIDUAL/ENTITY BEING TRACED:**

**\*\*Individual/Entity is:** Driver  Vehicle Owner  Home Owner  Tenant

Business  Doctor  Lawyer  Other  \_\_\_\_\_

**Individual/Entity's Insurance Carrier:** \_\_\_\_\_

**Individual/Entity's Policy Number:** \_\_\_\_\_ **Claim Number:** \_\_\_\_\_

**\*\*Individual First & Last Name/Entity Name:** \_\_\_\_\_

**\*\*Individual/Entity's Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

**Vehicle Info (VIN, Plate #, Make, Model, and Year):** \_\_\_\_\_

**Additional Info/Notes:** \_\_\_\_\_

BY SUBMITTING THIS REQUEST, YOU CONFIRM THAT YOU HAVE READ OUR TERMS AND CONDITIONS NOTICE (AVAILABLE ON OUR WEB SITE) AND AGREE TO THE CONTENTS THEREIN.



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### **TERMS AND CONDITIONS NOTICE REGARDING INSURANCE TRACING REQUESTS**

#### **FEES & BILLING**

OUR TERMS OF BUSINESS are net fifteen (15) days, unless prior arrangements have been made. The fifteen (15) days begins from the date your office receives the faxed report and invoice from us. Invoices not paid within twenty (20) days are subject to a ten dollar (\$10) per day penalty, with no ceiling on the number of penalty days. Invoices not paid within ninety (90) days will result in collections actions and the pursuit of legal remedies that may be available.

FEES QUOTED on the Request Form and Fee Schedule are per policy researched and will apply where a policy or a Self Insurer fails to provide coverage, for any reason (i.e. policy exclusions); unless the reported policy or Self Insurance was not in effect on the date of loss.

EXCEPTIONS TO THE FEE SCHEDULE may apply in cases involving lengthy research due to the age of the case. In these situations we will clearly outline any additional charges that will apply and will seek your approval in writing prior to our commencing the work.

IN SITUATIONS WHERE INCOMPLETE OR INACCURATE information has been provided to our office at the commencement of the trace, we will do our best to notify you of any additional fees that may become applicable as a result.

FOR CASES 10 YEARS or older, contact our office for a quote PRIOR to submitting your Request.

THERE IS NEVER A CHARGE to you if we are unable to identify policy limits on the date of loss. However, when requesting a limits only search, we will assume that you have already confirmed that the policy was in effect on the date of loss. As such, we will report the limits of the policy on the date of loss provided. Otherwise, we will report the limits of the policy as ZERO (0) indicating the policy was not in effect on the date of loss. You will be invoiced regardless. The only time there will not be an invoice for a LIMITS ONLY search, is if we are unable to obtain the limits of the policy that was indeed in effect on the date of loss.

POLICY EXISTENCE TRACES **are not** conducted on a "no-find, no-fee" basis. A \$25 Processing Fee applies regardless of outcome.

SHOULD WE OBTAIN ONLY PART OF THE INFORMATION REQUESTED, you will be invoiced only for that portion of the Request. (i.e. Your Request to us is to identify the insurer, policy number and policy limits. However, if we are only able to identify the insurer, you will only be invoiced for the portion of information provided.)

ALL RUSH cases are placed ahead of all NON RUSH cases, however, the RUSH fee is waived when the Requested information is not obtained or if the research has taken in excess of ten (10) business days. SUPER Rush cases are typically completed within two business days and cannot be cancelled. RUSH fees are charged per Defendant.

TERMINATION of a submitted Request will result in a \$100 Termination fee. Terminations or any changes to the initial Request Form must be made in writing. Verbal Requests cannot be accepted.

TO AVOID BEING INVOICED for policies already known to exist, please indicate the policy information on the Request Form when submitting your Request. We have no way of knowing what policy(s), if any, you are aware of, unless they are made known to us at the time of your Request submission. Policies noted on police reports are not considered valid policies, so we do not interpret them as known policies unless you specifically advise us that they are valid.

DISPUTES OF FEES must be brought to our attention within ninety (90) days from the date of invoice. Disputes brought after this period will not be entertained.

#### **DEFINITIONS**

INSURER shall be defined as the Carrier, Agent, Broker or a Defendant who is found to be Self Insured.

DATE OF LOSS shall be defined as the date provided on the Request Form. However, if a loss period is given, then the loss date shall be defined as any date during the reported loss period.

POLICY EXISTENCE/IDENTIFYING THE INSURER shall be defined as providing the client with a name, address and telephone number of the Insurer insuring the named Defendant on the loss date specified. Should the Insurer no longer be in business, we will provide you with the Insurer name and last known address on record when their business operations ceased.

TERMINATION shall be defined as the termination or cancellation of any search or Request at any point following our receipt of the Request.

#### **PROCESS**

REQUESTS should be transmitted only one time and via only one means (E.g. email, fax, mail, etc.). Each Request received is assigned a unique case number and will be processed and billed individually. It is the client's responsibility to ensure that duplicative or substantially similar Requests are not submitted. Disputes of fees resultant of duplicative Requests will not be entertained.

SEARCHES ARE PERFORMED under the Defendant name(s) only. Policies found may or may not cover the target vehicle or property owned/operated by the Defendant. The client will be invoiced in accordance with the Fee Schedule.

TURNAROUND time for our research is approximately fifteen (15) business days. All results will be faxed to the client immediately upon completion of our research with an applicable invoice.

WHEN REQUESTING THE POLICY LIMITS TRACE of an established policy, you must include the policy number and/or claim number and ANY correspondence from the Insurance Carrier.

#### **DISCLAIMER**

ML Research Group uses reasonable care to obtain accurate and up to date information from sources considered reliable. It is believed that all information provided is accurate, however the ML Research Group makes no warranty or guarantee, either expressed or implied, that the information provided herein is correct, since the information has been obtained from supplementary sources. You should not make a decision to proceed based solely upon the information provided herein, but should also use reasonable care and utilize other sources of information that are available to you in order to make your decision as to how to proceed.

*Request For Tracing Insurance Policy Information - Revised 03/29/2018*