

FREQUENTLY ASKED QUESTIONS AND ANSWERS REGARDING THE CLAIMS INFORMATION ORDER

1. **When was the Order issued?** The Order was issued on May 1, 2007.

2. **What does this Order require?** The Order requires claimants who have not yet received a Notice of Determination (“NOD”) for their Proof of Claim (“POC”) to provide the Liquidator with complete information about their claim(s) within certain time frames. If your POC covers more than one specific claim or if you filed a policyholder protection POC, you must provide the necessary information within the required time frames for each claim covered under your POC.

3. **Why does the Order talk about claims filed against me? I do not have any claims against me, but I did submit a POC to Reliance.** If you have not yet received a NOD for your POC, you are required to provide any updated information that has not already been submitted about your claim or submit a written explanation as to why such information cannot be obtained. You are also required to provide a further update annually, and respond within 60 days with any additional information specifically requested by the Liquidator.

4. **I already received a NOD for one of my claims. Do I have to provide additional information in order to receive a distribution?** If you filed more than one POC, or received a partial NOD, you are required to provide the information for each POC for which you have not received a NOD. If you have already received a NOD (other than a partial NOD), for all your POCs, you do not need to do anything further and you will be eligible for a distribution upon Court approval.

5. **What are the time frames to comply?** The time frames below apply to the underlying claim which is the basis for your POC(s).

Within 90 days of final resolution of any underlying claim resolved after the date of the Order.

Within 180 days of the date of service of the Order for all POCs where the underlying claim is already resolved.

Within 180 days of the date of service of the Order for all POCs where the underlying claim is not yet resolved or no underlying claim has yet been asserted.

At least annually thereafter for all POCs where the underlying claim is not yet resolved or where no underlying claim has yet been asserted.

Within 60 days from whenever the Liquidator requests specific information or documentation from you in writing.

6. **What constitutes full and complete claim information?**

For claims made against you by another person or entity, including worker compensation claims against you, where the claim has been resolved: A complete copy of your claim file should provide most information that is required, including, but not limited to: pertinent pleadings including the complaint, answer and deposition transcripts; expense payments; a settlement agreement, release, assignment or judgment, if applicable; any and all reports, medical evaluations; expert evaluations; attorney evaluations; witness statements, official reports such as police, fire or OSHA reports; invoices from vendors reflecting rates, details of services provided and service dates; any independent investigations conducted. The documentation provided should address and support coverage under the Reliance policy; causation and legal liability; proof of damages; actions taken in litigation, arbitration, mediation, settlement conferences, and court conferences. If this information cannot be provided, you must submit a written explanation as to why such information cannot be obtained.

For claims made against you by another person or entity, including worker compensation claims against you, where the claim against you is still pending: A complete copy of your claim file should provide most information that is required, including but not limited to: pertinent pleadings including the complaint, answer, and deposition transcripts; expense payments; a settlement agreement, release, assignment or judgment, if applicable; any and all reports, medical evaluations; expert evaluations; attorney evaluations; witness statements, official reports, such as police, fire or OSHA reports; invoices from vendors reflecting rates, details of services provided and service dates; any independent investigations conducted. The documentation provided should address and support coverage under the Reliance policy; causation and legal liability; proof of damages; actions taken in litigation, arbitration, mediation, settlement conferences, and court conferences. Please also include an indication of the current status of the claim, when you expect it to be resolved, and the estimated amount to be paid.

If your policy has a self-insured retention or a deductible amount: Loss runs for **all** claims (open and closed) that are within or exceed the self-insured retention or deductible with additional detailed information on all **open** claims within the self-insured retention or deductible amount. Providing only a loss run does not satisfy the requirements for providing information on open claims. (See, for example, the above paragraph for claims still pending.) Current information includes but is not limited to: the policy number and policy period; the Reliance claim number (if available); the claimant's name; type of loss; date of loss; accident description; paid to date information for indemnity/bodily injury; medical/property damage; expenses, outstanding loss and expense reserves and total incurred amounts.

If you are not aware of any claim against you: If you filed a general POC based on your policy without indicating any specific claim and you are still not aware of any specific claims under the policy, you must reply and indicate that you are not

aware of any claims at this time. If you subsequently become aware of a claim, you should provide notice of the claim and all related documentation immediately. Then, at least once a year, you must provide updated information about any claims or indicate that you still are not aware of any claims against you.

If you have filed a claim against an insured of Reliance: Please provide all documents supporting your claim and any damages against the Reliance insured. Supporting documents include, but are not limited to: pertinent pleadings including the complaint, answer and deposition transcripts; expense payments; a settlement agreement, release, assignment or judgment, if applicable; any and all reports, medical evaluations; expert evaluations; attorney evaluations; witness statements, official reports such as fire, police or OSHA reports; invoices from vendors reflecting rates, details of services provided and service dates; any independent investigations conducted. The documentation provided should address and support coverage under the Reliance policy; causation and legal liability; proof of damages; actions taken in litigation, arbitration, mediation, settlement conferences, and court conferences.

If you are making a claim under your own policy with Reliance: Please indicate the specific amount claimed and provide all documents to support this amount including, but not limited to: Reliance policy number; Reliance claim number (if available); proof of loss and expense payments; any and all reports, medical evaluations; expert evaluations; attorney evaluations; witness statements, police reports; fire reports; invoices reflecting rates, details of services provided and service dates; any independent investigations conducted. The documentation provided should address and support coverage under the Reliance policy and proof of damages.

If you are a vendor such as an attorney, medical provider, court reporting service, or general creditor: Please provide the following as applicable: Reliance policy number; Reliance claim number (if available); name of Reliance insured, case caption; outstanding invoices detailing services provided and the service dates and service amounts.

If your claim is for assumed reinsurance: Please provide the contract numbers and, if possible, a copy of the cover note or contract and the documentation supporting the amount of the claim, such as recent accounting statements or proof of loss and details regarding the claim.

If the Liquidator requests specific additional information, you are required to provide that information within 60 days or let us know within 60 days why the information is not available and when you will be able to provide the information.

7. Where do we send the required information? We have provided a return mailing label for your convenience. **When submitting any information it**

is crucial that you reference the POC number and, if available, the Reliance claim number which corresponds to the information. If you are sending us information for more than one claim, please identify the POC number that applies to each document or set of documents. Additional information submitted in the future may be sent to Proof of Claim Department, Statutory Liquidator of Reliance Insurance Company, P.O. Box 13527, Philadelphia, PA 19101-3257 or Proof of Claim Department, Statutory Liquidator of Reliance Insurance Company, Three Parkway, Philadelphia, PA 19102.

8. May I submit the information on a disk or CD or in other electronic format? Yes. We can accept disks or CDs but CANNOT accept DVD formatted files at this time. Multipage TIFs are preferable to PDFs for imaged documents, but we can accept PDFs if necessary. Please provide one file or document for each POC number and include the POC number in the document name.

9. What happens if I fail to comply with the Order? The Liquidator may issue specific demands requiring the requested information be produced at a specific time and place. If the information is still not provided, the Liquidator may also subordinate your claim to priority class (g)(2).

10. What does subordinate your claim to priority class (g) mean? Assets of the estate are distributed in order of the priority classes established by PA statute. All claims in each priority must be paid in full before any payments can be made to the next lower priority class. For example, priority (b) claims include all claims under policies for losses. If your claim would normally belong in priority class (b), the Liquidator has the discretion to assign your claim to the lower priority class – class (g) – as a late filed claim. At this point, it is unlikely that there will be sufficient assets to pay any portion of any class below class “b”.

11. What do I do if I no longer want to pursue my claim? The Pennsylvania Supreme Court has ruled that if you have a claim against a Reliance insured, you are not allowed to withdraw your POC. That would include not only those who have asserted claims against Reliance insureds, but also attorneys, vendors and other general creditors. The Commonwealth Court recently ruled that insureds are also not allowed to withdraw their POCs.

12. What if I submitted my claim in error? You should provide us with the information as to why your claim was submitted in error. If your claim has already been paid by another person or entity, you should provide whatever documentation indicates that your claim has been paid.

13. Can we still file new claims/new POCs? Yes, however the claim filing deadline for the Reliance Estate was December 31, 2003. Notwithstanding the Claims Information Order, any claims filed after the deadline will be evaluated in accordance with the requirements of the late filed claim provision set forth at 40 P.S. §221.37(b) of the Insurance Department Act of 1921. Forms and

instructions for filing a POC can be obtained at www.reliancedocuments.com or by calling 1-800-864-4000. Please include your reason for filing late in the statement of facts documenting your claim.

14. I don't remember what claims I filed. Can I have copies of my POCs? Yes, we can provide you or your attorney with a copy of the POC(s) you filed. Please indicate which POCs you need from the enclosed list.

15. What do I have to do if my claim is currently handled by a Guaranty Association (GA)? You only need to let us know which GA is handling your claim. If we need further information after that, we will contact you. Please DO NOT contact the GAs regarding this Order. If you do not know which GA is handling your claim, just tell us that it is being handled by a GA, but you do not know which one.

16. I have already submitted all of the information I have. Do I need to do anything else? Yes. Let us know that you believe you have provided all the information available to you. If you are unable to obtain the necessary information, please submit a written explanation as to why the information cannot be obtained. However, at least annually, you must provide updated information or indicate that there is no further information available. If the Liquidator contacts you to request specific additional information, you must provide the information within 60 days or let us know, within 60 days, when you will provide the information.

17. What if I have already submitted all of the information required and have not yet received a NOD? The Liquidator will issue a NOD after evaluating all of the required information. If you believe that it has been more than 6 months since you submitted all information, please contact the Reliance claim evaluator as shown on your most recent notice of status letter.

18. When will my claim be paid? What is the date for a distribution and how much will be distributed? The Liquidator is evaluating the feasibility and timing of the first interim partial distribution and expects to submit a recommendation to the Commonwealth Court in 2007. As soon as we know the percentage that can be paid on the approved claim amounts, we will submit a proposal to the Commonwealth Court for its approval.

19. If I have a question not included in this list who can I call? You should call Reliance Insurance Company, in liquidation, at 215-864-4000 and listen carefully to the choices offered for additional information.