

## **AVIVA CLASS MEMBER CLAIMS**

If your claim for business income loss coverage due to COVID-19 closures has been denied by Aviva and your business was insured under an Enterprise Commercial Insurance Policy with Aviva that contains "negative publicity" and/or "restricted access" coverage, please complete this form. Please also attach a copy of the policy; proof of loss form, if prepared; and, a copy of Aviva's denial letter.

### **CONTACT INFORMATION**

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1. Name:
2. Address:
3. Phone number:
4. Email:
5. Name of insured business:

### **INSURANCE CLAIM AND POLICY**

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1. Name of Policy:
2. Date business closed and/or was restricted due to COVID-19:
3. Date business re-opened (if applicable):
4. Estimated business losses (total):
5. Estimated business losses (best 30 days since closure):

Any further comments

If you have any questions, please contact Ava Williams at 416-868-3130.

Once completed, please return to **Ava Williams at [awilliams@thomsonrogers.com](mailto:awilliams@thomsonrogers.com)**

By checking this box, I confirm that it is my intention to retain Thomson, Rogers should I qualify for the class proceeding. I also authorise Thomson, Rogers to notify the Defendant of my intention and share with the Defendant the information provided above.