

Aon/Albert G. Ruben Insurance Services, Inc.

User Guide for Ruben Online Forms

Rev. 09/30/2011

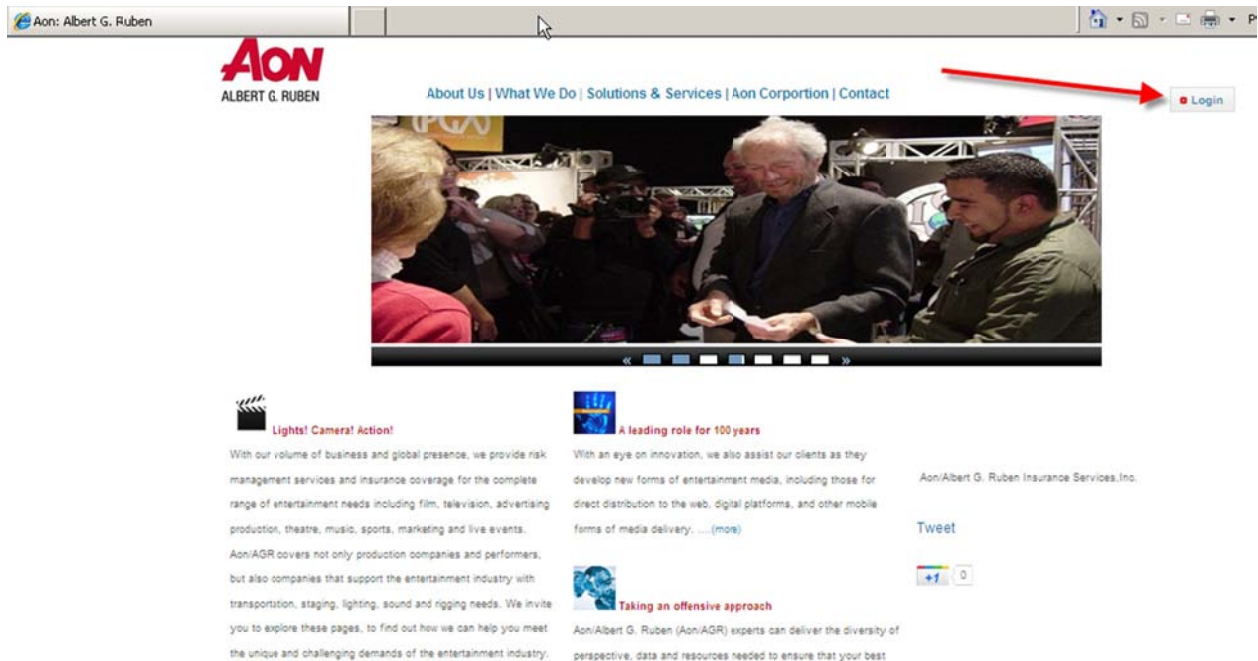
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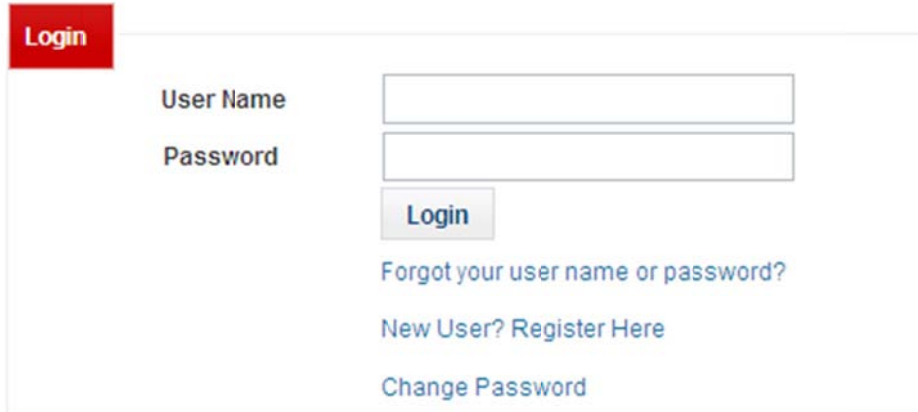
Welcome to the Ruben Online Forms application! In this document you will find all the information you need to successfully create your user profile, create and submit a declaration form with special coverage questionnaires and surveys, as well as submit First Notice of Claim information for your declaration form.

1. User Profile

When you first log into www.albertgruben.com, you will see the homepage with the Login button at the upper right hand corner of the page:

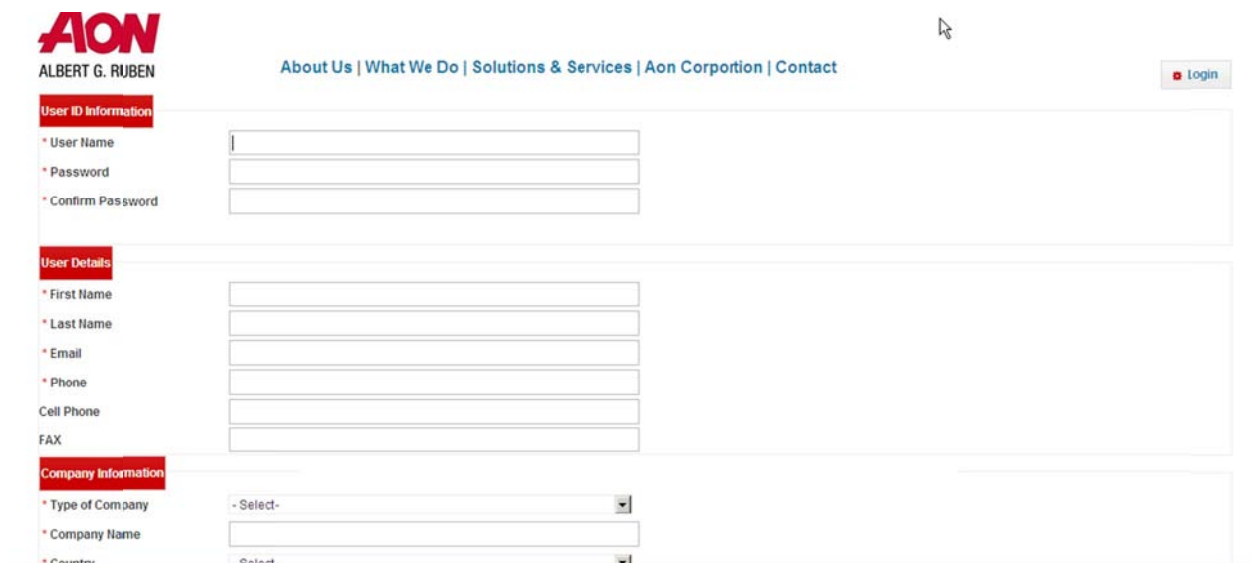


Click on the button and you will be presented with a login screen.



The screenshot shows a login form with a red header containing the word "Login". Below the header, there are two input fields: "User Name" and "Password". A "Login" button is positioned below the password field. Underneath the button, there are three links: "Forgot your user name or password?", "New User? Register Here", and "Change Password".

If you are a first-time to the Ruben Online Forms application, select [New User? Register Here](#).



The screenshot displays the "User Profile" form. At the top left is the AON logo and the name "ALBERT G. RUBEN". To the right is a navigation menu with links: "About Us | What We Do | Solutions & Services | Aon Corporation | Contact". A "Login" button is in the top right corner. The form is divided into three sections:

- User ID Information:** Includes fields for "User Name", "Password", and "Confirm Password", each with a red asterisk indicating it is required.
- User Details:** Includes fields for "First Name", "Last Name", "Email", "Phone", "Cell Phone", and "FAX". "First Name" and "Last Name" have red asterisks.
- Company Information:** Includes a dropdown for "Type of Company", a text field for "Company Name", and a dropdown for "Country". "Country" has a red asterisk.

You will be presented with the User Profile screen. All required fields are indicated by a red asterisk to the left of the label.

The first section is the User ID Information.



User ID Information

* User Name

* Password

* Confirm Password

These are the credentials you will use to log onto the system going forward. You may choose your own user name and password. Enter an easy-to-remember user name, between 5 and 30 characters long. Use alphabetical characters only.

Then enter your password. It needs to be between 5 and 15 characters long. In order to create a “strong” password, use a combination of both upper and lower case letters, numbers, and special characters such as %, \$ or &.

Enter the password again in the “Confirm Password” box. The website will inform you if they do not match, and you will have to re-enter your password until both of them match.

The website will evaluate the strength of the password you’ve entered:



User ID Information

* User Name

* Password Weak

* Confirm Password



User ID Information

* User Name

* Password Strong

* Confirm Password

The next section contains User Details.

User Details	
* First Name	John
* Last Name	Smith
* Email	jsmith@CompanyA.com
* Phone	818 555 1212
Cell Phone	818 555 1313
FAX	

The last section pertains to the organization you work for.

FAX	
Company Information	
* Type of Company	- Select -
* Company Name	
* Country	
* Address 1	
Address 2	

Select the Type of Company you work for from the drop-downlist.

Next, enter your Company Name.

Company Information	
* Type of Company	AGENCY / NETWORK / DIVISION
* Company Name	Company A

Your company address information:

Company Information	
* Type of Company	AGENCY / NETWORK / DIVISION
* Company Name	Company A
* Country	United States
* Address 1	1235 Main Street
Address 2	
* City	Los Angeles
* State/Province	CALIFORNIA
* Zip/Postal Code	91006
* Main Phone	213 555 6666
FAX	
Web Address	

Finally complete the required field “What entity are you doing a production for?” This is the company (or companies) that has engaged your company to provide some sort of production work. It’s important to keep this information up-to-date. If your company has been hired by a new company after you’ve already completed your user profile, please return here when you log back in and update this field, so we can make sure you have the appropriate access to all the forms you will need.

* What entity are you doing a production for?	Company B, Company C
---	----------------------

Once you’ve completed the form, including all the required fields, you may click on the “Register” button at the bottom of the page:



The website will return a Success! message.

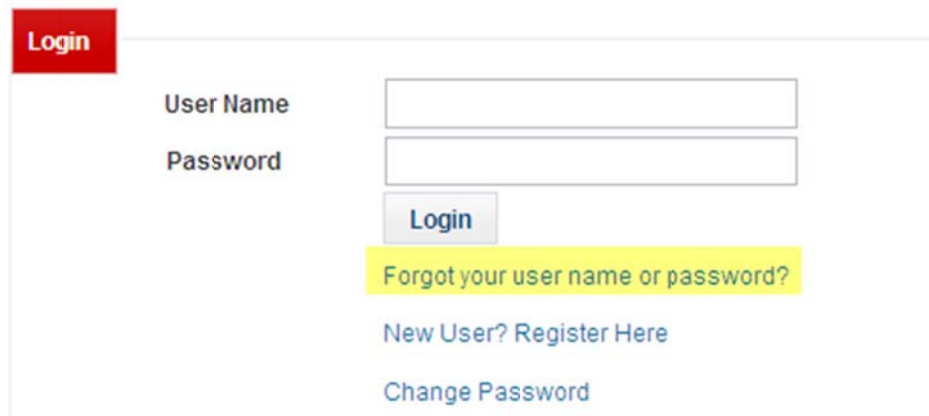
i Success! Thank you for submitting your registration to www.agruben.com! You will be sent an email to the address you provided in your user profile once your registration is completed.

The website will notify an Aon Administrator that you have completed your new user profile. Once the Aon Administrator has reviewed your information, they will approve your credentials. The website will send you an email confirmation of approval, along with a copy of this user guide for your reference.

The next time you access the website, log in with your user name and password, and you can begin using Ruben Online Forms!

Forgot User Name/Password

If you forget your user name or password, you can request either or both from the website login page:



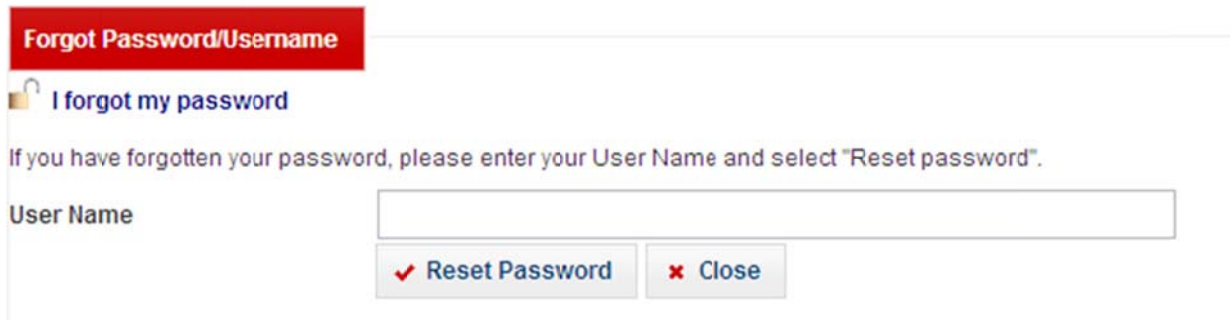
The screenshot shows a login form with a red header labeled "Login". Below the header are two input fields: "User Name" and "Password". A "Login" button is positioned below the "Password" field. Below the "Login" button, the text "Forgot your user name or password?" is highlighted in yellow. Below this text are two blue links: "New User? Register Here" and "Change Password".

Click on the wording (as highlighted) and you will be taken to the next screen:



The screenshot shows a page with a red header labeled "Forgot Password/Username". Below the header are two options, each with a small icon to its left: "I forgot my password" (with a lock icon) and "I forgot my User Name" (with a person icon).

If you have forgotten your password, you will be prompted to enter your User Name and click the Reset Password button:

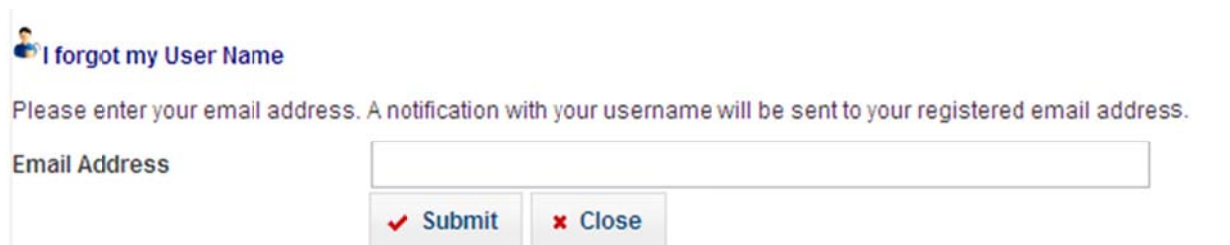


The screenshot shows a web form titled "Forgot Password/Username" in a red header. Below the header is a lock icon and the text "I forgot my password". A message reads: "If you have forgotten your password, please enter your User Name and select 'Reset password'". There is a text input field labeled "User Name". Below the input field are two buttons: "Reset Password" with a red checkmark icon and "Close" with a red X icon.

The website will inform you that your password has been reset, and that an email is waiting for you in your inbox.

[Eileen provide snapshot when available]

If you have forgotten your User Name, you will be prompted to enter your email address. The website will send you an email with your user name to the address you provided in your user profile, when you press the Submit button.



The screenshot shows a web form titled "I forgot my User Name" with a person icon. A message reads: "Please enter your email address. A notification with your username will be sent to your registered email address." There is a text input field labeled "Email Address". Below the input field are two buttons: "Submit" with a red checkmark icon and "Close" with a red X icon.

Change Password

You may also change your password at any time by clicking on the wording (as highlighted) "Change Password":

Login

User Name

Password

[Forgot your user name or password?](#)

[New User? Register Here](#)

Change Password

Fill in all of the information on the screen, and click on “Change Password”.

Change Password

User Name

Old Password

New Password Strong

Confirm New Password

2. Declaration Forms – Agency Users, Production Companies

Depending on who you are doing work for, you may be responsible for filling out the declaration form, which provides Aon/Albert G Ruben details about your production.

Once you've authenticated into the system, you will be taken to the Declaration Dashboard, which looks something like this:

Declaration

Assured - ALL - Agency - ALL - Status - ALL -

General Motors Corp.
Kraft
Omniccm Group Inc.
Draft
Submitted
Approved

Note: Select "Create declaration" to report a new production/job. To report a claim, locate the declaration and click on "Create".

Declaration Dashboard

								Aon		Production Company					
Dec ID	Prod Title	Claim	# Claims	Assured	Prod Ref	Dec Date	Prod Start Date	Status	Awd Letter	Cert	Budget	Storyboard	Resume	Schedule	WC Cert
1-10															

You may see one or more entries in the Assured drop down, depending if your company does productions for one or more Assureds.

Create a new Declaration

To create a new Declaration, click on the "Declaration" menu and select "Create Declaration".

If your company does business with more than one Assured, you will be prompted to select for which Assured you'd like to create the declaration:

Assured List	
SN	Assured Title
1	Adidas North America Inc.
2	Kraft
3	Reebok International Ltd.

Select one, and the appropriate blank declaration form will open up. If your company only does business with one Assured, you will be taken straight to the blank declaration form.

IMPORTANT NOTE: Declaration forms for Assureds may be different, so it is important you select the correct Assured!



ALBERT G. RUBEN

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Home

Declaration

Users

Company Info

Assured * Omnicom Group Inc.
 Agency / Network / Division Merkle + Partners
 Address 200 Varick Street NYC NY USA


Declaration Details

* ContactName	<input type="text" value="Bob Smith"/>
* Contact Phone	<input type="text" value="212 555 1212"/>
* Contact Email	<input type="text" value="bsmith@merkle.com"/>
Contact Cell Phone	<input type="text"/>
Contact Fax	<input type="text"/>
* Title of Project	<input type="text"/>
* Job #	<input type="text"/>
* Date Job Awarded	<input type="text"/>
* Filming Start Date	<input type="text"/>
* Filming Completion Date	<input type="text"/>
* Advertiser	<input type="text"/>
* Name of Production Company/Photographer	<input type="text"/>
Address 1	
Address 2	
City	
State	
Zip	
Country	

At the top, you will see the Assured for which this production is being done, as well as the company you belong to. This information is non-editable on this page. If this information is *not* accurate, and you no longer work for the Agency/Network/Division as displayed, you should go immediately to your User Profile and provide your current company information. *It is critical that your User Profile information is kept up-to-date.*

The first fields in the Declaration Details section are pulled from your User Profile. You may overwrite them if you wish to provide different contact information for this particular production. Again, if the information that is pulled in automatically is not accurate, please go to your User Profile to update the information.

All required fields are indicated by a red asterisk * beside the label. You may leave them blank and save the record at any time, and as many times as you like, as a draft by clicking on the "Save as Draft" button at the bottom of the screen. However, when you submit the declaration, all of the required fields must be completed.

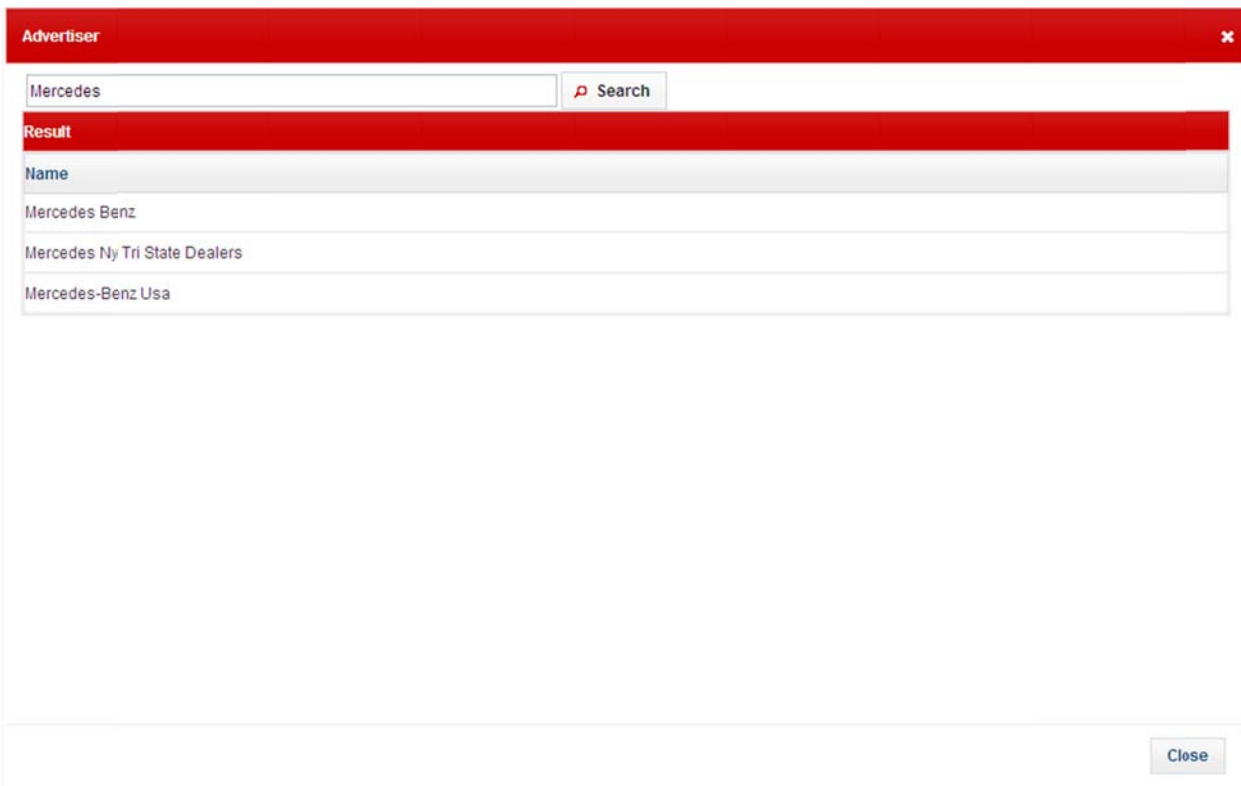
When filling out the "Advertiser", "Name of Production Company/Photographer" or any other field that has a magnifying glass icon  beside it, you should click on the icon to see a list from which to choose.

Sample screen:



Advertiser

Click on the Search button to see any records that begin with the word "Mercedes":



Advertiser

Name
Mercedes Benz
Mercedes Ny Tri State Dealers
Mercedes-Benz Usa

Clicking on one of the results in the list will fill in the field in the Declaration screen.

* Advertiser

Mercedes-Benz Usa



When you click on the magnifying glass icon beside “Name of Production Company” or any company-related, you will have the option of searching for an existing company (which we ask you to do first), or entering a new company.

Association DetailsType of Company New Existing

Search

Like the previous example, typing in a value and clicking the “Search” button will return a list of matching values, if they exist:

Association Details Type of Company New Existing

Supply

Search

Result**Name**

Supply & Demand

Supply And Demand

Clicking on one of them will fill not only the name of the production company in this example, but also the production company's address.

* Name of Production Company/Photographer

Supply & Demand



Address 1

145 Hudson St

Address 2

City

NYC

State

NY

Zip

10013

Country

USA

If you do a search, and the production company you are looking for is not in our database, you can choose to add a new one by clicking on “New” instead of “Existing” at the top of the Association Details screen.

Association Details

Type of Company New Existing

Name

Address 1

Address 2

City

State

Zip

Country

The screen will refresh and display address fields that you may fill in. Once you are done, click on the “Assign” button. The data now appears on the Declaration screen:

* Name of Production Company/Photographer	<input type="text" value="ABC Company"/>	<input type="button" value="Ⓜ"/>
Address 1	1234 Main Street	
Address 2	Suite 309	
City	New York	
State	NY	
Zip	10010	
Country	USA	

When your declaration is processed by Aon, this company will be added to the database and will be available in the future.

If this is an agency/advertiser declaration, click on “Yes” and additional budget fields will appear for you to complete. All of the budget items will be automatically totaled on the Production Cost line. “Markup” will be subtracted from the budget.

* Is this an agency/advertiser declaration?	<input checked="" type="radio"/> Yes <input type="radio"/> No
* AICP A-K	<input type="text" value="380,000.00"/>
* Director's Fee	<input type="text" value="25,000.00"/>
* Editorial	<input type="text" value="30,000.00"/>
* Animation/CGI	<input type="text" value="0"/>
* Pension & Welfare	<input type="text" value="25,000.00"/>
* Travel	<input type="text" value="22,396.00"/>
* Markup	<input type="text" value="0"/>
* Production Cost	482,396.00

The Production Company contact information is very important to the declaration.

Production Contact	<input type="text" value="Eileen Raycroft"/>
Production Contact Phone	<input type="text" value="818 833 9300"/>
Production Contact Email	<input type="text" value="Eileen.Raycroft@aon.com"/>

When your declaration has been approved by Aon/Albert G Ruben, an email will automatically be sent to the production contact specified here, instructing them to complete the special coverages questionnaire and any applicable surveys.

Once you are satisfied that the declaration form is complete and accurate, click on the "Submit" button at the bottom of the page. Aon/Albert G Ruben will automatically be notified of your submission and will review your declaration form.

Rework a Declaration

If you or an Aon user decides that something on the declaration form in "Submit" status needs to be changed, the Aon user can return the declaration form to you by changing the status of the form to "Rework". This is the same as having the form in "Draft" status, which will allow you to make the required changes. Once they have been completed, you can click on the "Submit" button once again.

Once a declaration form has been "Approved" however, reworking the form is no longer possible.

Cancel a Declaration

You can request that a declaration be cancelled. When you press the "Cancel" button at the bottom of the screen, you will be presented with a dialog box. Please enter a comment and click on "Submit".

You will receive a confirmation that the declaration is now in “Cancelled Pending” status.

An Aon representative will review the declaration and either approve or deny the cancellation request.

Declaration Dashboard										Aon		Production Company			
Dec ID	Prod ID	Prod Title	Assured	Prod Ref	Dec Date	Prod Start Date	Status	Awd Letter	Cert Budget	Storyboard	Resume Schedule	WC Cert	Claims	Claim	
534		Credit Adj...	A&E Television Netwo...	ADJ<\$1,00...	10/20/2011	4/21/2010	CancelledPending								

Adding an Attachment to a Declaration

On the bottom of the declaration screen, you will see a button called “Add Attachment”.

Type of Project Other

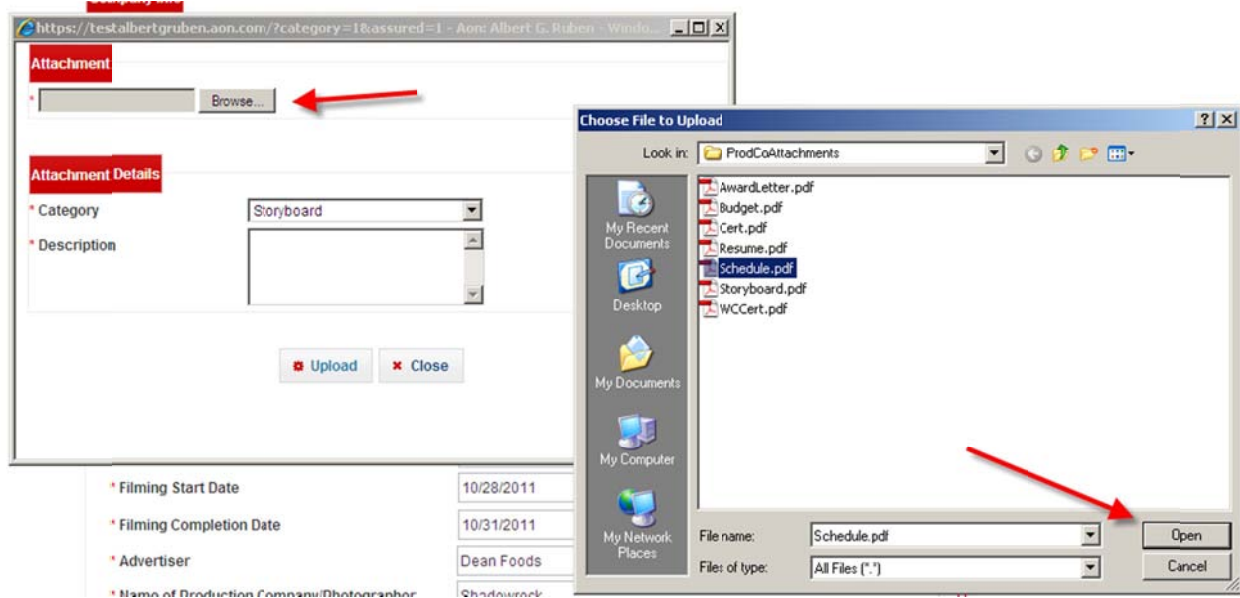
* Production Cost Type Live Action:A-K+Directors Fee+Editorial-mark-up

History

Created by	flintstone	Created on	10/24/2011 5:07:57 PM
Modified by	eileen	Modified on	10/24/2011 12:00:00 AM

+ Add Attachment
View Attachment
Cancel
x Close

Clicking on “Add Attachment” takes you to the following screen:



Click on the “Browse” button, and the File Upload screen will appear. Navigate to the file you wish to upload, and click on “Open”. The file name will appear in the Attachment screen.


Click on the Category drop-down and select a category which best fits the attachment you are uploading. Add a description, which is required. Then click on the "Upload" to complete the process.

Once you've received a success message, you can upload another document, or you can close the screen and return to the declaration screen.

Declaration Dashboard									Aon		Production Company			
Dec ID *	Prod Title *	Claim	# Claims	Assured *	Prod Ref	Dec Date *	Prod Start Date *	Status *	Awd Letter	Cert	Budget	Storyboard	Schedule	WC Cert
542	Babette Pr ...	Create		Omnicom Group Inc.	09876	10/25/2011	10/27/2011	Approved						
537	The Omnico ...			Omnicom Group Inc.	ABC1234	10/21/2011	10/25/2011	Submitted						
496	Santa's Ch ...			Omnicom Group Inc.	ABC123	10/13/2011	10/3/2011	Submitted						

1-10

You can tell on the declaration dashboard which attachments have been uploaded – they are indicated by this symbol: . Attachments which are required but have not yet been uploaded are indicated by this symbol: . Finally, not all clients require all

types of attachments. If you see this symbol  it means that no attachment is necessary for the production.

You also have the option to upload other types of documents as needed, which can be categorized as "Other". These will appear in the attachments list; however, they will not appear on the declaration dashboard.

Viewing Declaration Attachments

If your role allows you to view the Declaration records, you can see a list of all the attachments for a declaration by opening the declaration record, scrolling to the bottom of the page and clicking on "View Attachments".



Attachments					
Document Name	Description	Category	Username	Created	
Budget.pdf	Test	DeclarationModule	pcarden	10/31/2011 01:43:58	 Download
Storyboard.pdf	Test	DeclarationModule	pcarden	10/31/2011 01:45:37	 Download

To open the attachments, click on "Download" and open the attachment.

Completing the Special Coverages Questionnaire

Once a declaration form has been submitted, the production company can proceed by answering the Special Coverages Questionnaire.

If the production company contact is the user who has created the declaration form, they can re-open the declaration and click on

IF the production company contact is not the user who has created the declaration form, they will be taken directly to the Special Coverages screen.

Please select the list of coverage applicable

Coverages	
Coverage	Options
Aircraft	<input type="radio"/> Yes <input type="radio"/> No
Watercraft	<input type="radio"/> Yes <input type="radio"/> No
Railroad	<input type="radio"/> Yes <input type="radio"/> No
Foreign	<input type="radio"/> Yes <input type="radio"/> No
Stunts	<input type="radio"/> Yes <input type="radio"/> No
Animals	<input type="radio"/> Yes <input type="radio"/> No
Cast Insurance (special by carrier)/Special Talent	<input type="radio"/> Yes <input type="radio"/> No
Pyrotechnics	<input type="radio"/> Yes <input type="radio"/> No
Automobile Precision Driving/Vehicle Stunts	<input type="radio"/> Yes <input type="radio"/> No
Other	<input type="radio"/> Yes <input type="radio"/> No

[Submit](#)

Every coverage must be completed by selecting either "Yes" or "No". If you decline a coverage now, you may request it later.

Once completed, click on the "Submit" button.

Creating a coverage survey

Coverages Selected						
ID	Lines of Coverage	State	Created	Draft	Submitted	Survey
1216	Stunts	Selected	10/27/2011	0	0	+ Create View

Coverages Added						
ID	Lines of Coverage	State	Added	Draft	Submitted	Survey

Coverages Unselected						
ID	Lines of Coverage	State	Created			
1212	Aircraft	Unselected	10/27/2011	+ Add		
1213	Watercraft	Unselected	10/27/2011	+ Add		
1214	Railroad	Unselected	10/27/2011	+ Add		
1215	Foreign	Unselected	10/27/2011	+ Add		
1217	Animals	Unselected	10/27/2011	+ Add		
1218	Cast Insurance (special by carrier)/Special Talent	Unselected	10/27/2011	+ Add		
1219	Pyrotechnics	Unselected	10/27/2011	+ Add		
1220	Automobile/Precision Driving/Vehicle Stunts	Unselected	10/27/2011	+ Add		
1221	Other	Unselected	10/27/2011	+ Add		

In the example above, "Stunts" was the only special coverage selected. The user may now complete the next step, which is to complete the Stunts survey. Click on the "Create" button for "Stunts".

+ Show Survey Save As Draft Close

Step 1

In order to properly evaluate the hazards involving stunts and to determine the need for additional coverage, this information must be submitted and must be approved prior to filming:

* Describe type of scenes being filmed:

Scene takes place on a set in a barroom. Choreographed barroom brawl.

Step 2

List stunts by type, location, and how many people are involved:

* Stunt Type:	<input type="text" value="Fist fight"/>	
* Location:	<input type="text" value="Barroom/location on set"/>	
* Date:	<input type="text" value="10/27/2011"/>	
* How many people involved:	<input type="text" value="2"/>	+ Add - Delete
2) * Stunt Type:	<input type="text" value="Chair thrown through window"/>	
2) * Location:	<input type="text" value="Barroom/location on set"/>	
2) * Date:	<input type="text" value="10/28/2011"/>	
2) * How many people involved:	<input type="text" value="1"/>	

Step 3

* Describe safety measures used to protect participants.

public and equipment:

* Who is employer of record of person(s) performing stunt(s):

* Provide a bio resume for each stunt person, including stunt coordinator. + Browse

Note: We recommend that you advise your equipment vendor about how the equipment will be used, i.e. taken into hazardous environment, camera taken down waterslide, etc. Any recommendations suggested by the vendor to protect the equipment should be adhered to, to ensure proper care.

+ Submit

You may save the survey at any time as draft. All required fields must be completed before you may submit the form.

You also have the option of seeing the survey in a step-by-step format. Click on the "Show Survey" button at the top of the screen before you begin filling out the form. The screen will now look like this:

+ Show All Save As Draft Close

Step 1

In order to properly evaluate the hazards involving stunts and to determine the need for additional coverage, this information must be submitted and must be approved prior to filming:

* Describe type of scenes being filmed:

Back Next

Each step will be presented in a new screen, and you can navigate back and forward through the screens with the “Back” and “Next” buttons.

To return to the screen with all of the steps on the same page, click on “Show All”.

Some surveys, including this example, allow you to create multiple entries for a particular subject. In this case, you can list as many stunts as needed by clicking on the “Add” button – you will see another set of fields to complete for each stunt.

Step 2

List stunts by type, location, and how many people are involved:

* Stunt Type:

* Location:

* Date:

* How many people involved:

2) * Stunt Type:

2) * Location:

2) * Date:

2) * How many people involved:

Some surveys require you to upload supporting documentation.

Step 1

A copy of the railroad contractual agreement:

* Description of scenes involving railroad equipment:

Dates and times equipment is to be used:

* Date:

* Time:

* Location(s) of equipment:

* Where is equipment being used:

* Where is equipment being used:

* Where is equipment being used:

completed?

Step 2

* Type of equipment used (describe equipment). Please provide details:

* Describe activities involving equipment:

personnel:

* How many people will be involved:

Distances and speed of equipment:

Attachment

Please select file to be attached

File Upload

Look in: Temp

AutoAccident.bmp

PoliceReport.pdf

Railroad.pdf

File name:

Files of type: All Files

You may upload a copy of the Railroad contractual agreement required in the above example by clicking on “Add”. When the Attachment screen appears, click on “Browse” to show the “File Upload” screen. Navigate to where you have the Railroad contractual agreement on your computer, select the file and click on “Open”.

Click on “Attach” on the Attachment screen, and your file will appear underneath the label:



You may delete the attachment by clicking on the icon to the right of the file name, or you may continue to add additional documents, if multiple documents are required.

When you have completed the survey, either submitting it or saving it as a draft, the application will close the survey and you will see this screen:

The screenshot shows a table titled "Surveys" with a red header. The table has columns for ID, Created By, Created On (GMT -04:00:00), Status, Edit, and Delete. There is a "Close" button in the top right corner. The table contains one row of data.

ID	Created By	Created On (GMT -04:00:00)	Status	Edit	Delete
674	shakira	10/24/2011 12:54:27			

This shows that I have one “Stunts” survey in draft status. I can either delete it or edit it further.

To return to the main surveys screen, click on the “Close” button at the top right –hand side.

If I need to return to the “Stunts” survey from the main surveys screen, I can click on “View”. I can also see that I have one survey in Draft status, and zero surveys in Submitted status.

I can submit multiple surveys for any line of coverage, for example, if I have additional shooting days or I wish to amend what I had previously submitted. **Submitted surveys can no longer be edited by any user.**

Coverage's Selected						
ID	Lines of Coverage	State	Created	Draft	Submitted	Survey
1181	Stunts	Selected	10/24/2011 12:52:51	1	0	+ Create View

Coverage's Added						
ID	Lines of Coverage	State	Added	Draft	Submitted	Survey

Coverage's Unselected						
ID	Lines of Coverage	State	Created			
1177	Aircraft	Unselected	10/24/2011 12:52:51	+ Add		
1178	Watercraft	Unselected	10/24/2011 12:52:51	+ Add		
1179	Railroad	Unselected	10/24/2011 12:52:51	+ Add		
1180	Foreign	Unselected	10/24/2011 12:52:51	+ Add		
1182	Animals	Unselected	10/24/2011 12:52:51	+ Add		
1183	Cast Insurance (special by carrier)/Special Talent	Unselected	10/24/2011 12:52:51	+ Add		
1184	Pyrotechnics	Unselected	10/24/2011 12:52:51	+ Add		
1185	Automobile/Precision Driving/Vehicle Stunts	Unselected	10/24/2011 12:52:51	+ Add		
1186	Other	Unselected	10/24/2011 12:52:51	+ Add		

By clicking on the "Add" button next to Coverages Unselected, I can add them to the "Coverages Added" list, and proceed by completing the surveys as instructed above.

In the example below, I've added the "Railroad" coverage request.

Coverage's Selected						
ID	Lines of Coverage	State	Created	Draft	Submitted	Survey
1181	Stunts	Selected	10/24/2011 12:52:51	1	0	+ Create View

Coverage's Added						
ID	Lines of Coverage	State	Added	Draft	Submitted	Survey
1179	Railroad	Added	10/24/2011 01:09:57	0	0	+ Create View

Coverage's Unselected						
ID	Lines of Coverage	State	Created			
1177	Aircraft	Unselected	10/24/2011 12:52:51	+ Add		
1178	Watercraft	Unselected	10/24/2011 12:52:51	+ Add		
1179	Railroad	Added	10/24/2011 12:52:51	+ Add		
1180	Foreign	Unselected	10/24/2011 12:52:51	+ Add		
1182	Animals	Unselected	10/24/2011 12:52:51	+ Add		

3. Claims

In order to submit a claim, a Declaration form must be in either approved, confirmed or finalized status.

Create a New Claim

From the Declaration dashboard, locate the appropriate Declaration form:

Declaration Dashboard

Declaration Dashboard									Aon		Production Company				
Dec ID	Prod Title	Claim	# Claims	Assured	Prod Ref	Dec Date	Prod Start Date	Status	Awd Letter	Cert	Budget	Storyboard	Resume	Schedule	WC Cert
408	Claim Test ...	Create	3	Omnicom Group Inc.	ABC	10/4/2011	10/5/2011	Approved							

1-10

In the third column, under the “Claims” header, click on the “Create” link. The application will open a new Claims record:



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Home	Declaration	Claims	Users
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First Notice of Claim

Production Company	Area 51 Films
Title of Production	Claim Test 1
Production Ref	ABC

Please enter contact information for person who we can contact about this claim:

* First Name	<input type="text" value="John"/>
* Last Name	<input type="text" value="Smith"/>
* Phone	<input type="text" value="888 555 1212"/>
* Email	<input type="text" value="jsmith@companya.com"/>

* Type of Claim	<input checked="" type="radio"/> Claim Involving Auto(s) <input type="radio"/> Others
-----------------	---

* Date of Loss	<input type="text" value="10/1/2011"/>
----------------	--

Location of Loss:

* Country	<input type="text" value="United States"/>
* State	<input type="text" value="CALIFORNIA"/>

Address

* City	<input type="text" value="Los Angeles"/>
--------	--

* Complete Description of loss	<input type="text" value="My car was struck by a production vehicle at the intersection of 8th and Figueroa in downtown Los Angeles. I was turning left, and the light had just"/>
--------------------------------	--

The top three fields set the context from the Declaration form – they are not editable. If this is not the correct production, click “Close” at the bottom of the screen, return to the Declaration Dashboard, and locate the correct Declaration form.

The first 4 required fields (required fields are indicated by a red asterisk to the left of the label) provide necessary contact information regarding the claim.

If you are submitting a claim that involves autos in any way, you should select “Claim Involving Auto(s)” as the Type of Claim. Otherwise, select “Other”.

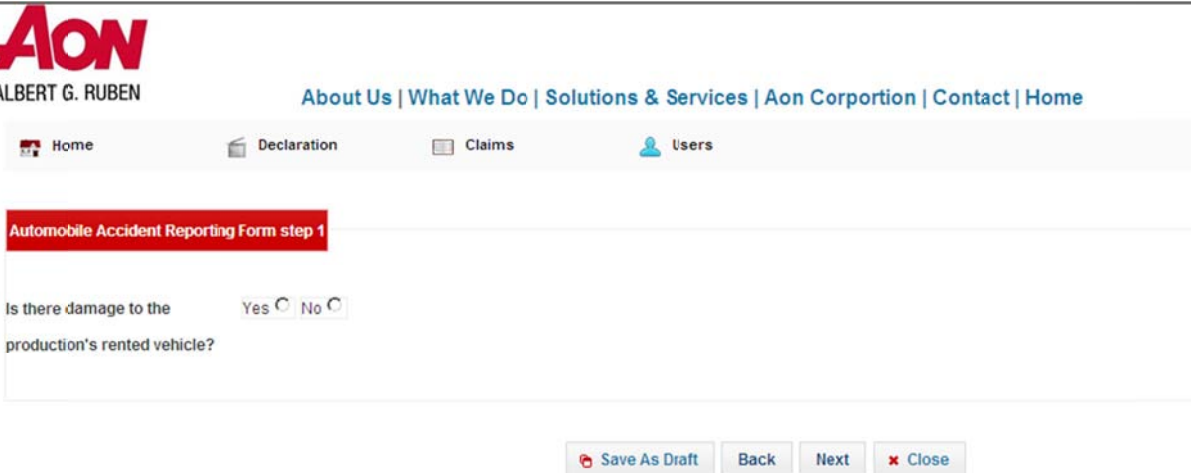
“Date of Loss” should be the date the claim occurred.

If your claim occurred outside the USA, select "Non US State" in the "State" drop down.

Please be as descriptive as possible in the "Complete Description of loss" field.

Click on the "Next" button to proceed to the next screen. You may also click on "Save as Draft" at any time, and as many times as you wish.

If you selected "Claim involving auto(s)", the next screen appears:



The screenshot shows the AON Ruben Online Forms user interface. At the top left is the AON logo and the name "ALBERT G. RUBEN". To the right is a navigation menu with links: "About Us | What We Do | Solutions & Services | Aon Corportion | Contact | Home". Below this is a secondary navigation bar with icons and labels for "Home", "Declaration", "Claims", and "Users". The main content area is titled "Automobile Accident Reporting Form step 1" in a red header. Below the header is a question: "Is there damage to the production's rented vehicle?" with radio button options for "Yes" and "No". At the bottom of the form are four buttons: "Save As Draft", "Back", "Next", and "Close".

If you select "No", you may proceed to the next screen. You may also navigate back to the previous screen (if applicable) at any time. If you select "Yes", more questions will appear for you to fill in:

Automobile Accident Reporting Form step 1

Is there damage to the production's rented vehicle? Yes No

Name of the Rental Company or Owner of Production Vehicle Galpin Ford

Country United States

State CALIFORNIA

Rental Company or Owner's Address 1234 Van Nuys Blvd.

City Van Nuys

Zip/Postal Code 91605

Telephone 888 555 1313

Email info@galpinford.com

Name of the Production Art O'Connor

Company's Driver

Telephone 888 555 1414

Email aconnor@galpinford.com

Make Chrysler Town & Country

Body Type Van

Year 2009

* Description of damage to Production vehicle Front end damage

Estimate of Repair Costs 2500

[Save As Draft](#) [Back](#) [Next](#) [Close](#)

Click on "Next" to proceed to the next screen.



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Is there any damage/injury to Yes No
another party (e.g.pedestrian/
passenger/ driver)?

[Save As Draft](#)[Back](#)[Next](#)[Close](#)

If you select "No", you may proceed to the next screen. You may also navigate back to the previous screen (if applicable) at any time. If you select "Yes", more questions will appear for you to fill in:



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Is there any damage/injury to Yes No
another party (e.g.pedestrian/
passenger/ driver)?

Name of injured party	<input type="text" value="Fred Smith"/>
Country	<input type="text" value="United States"/>
State	<input type="text" value="CALIFORNIA"/>
Address	<input type="text" value="345 Fifth St"/>
City	<input type="text" value="San Fernando"/>
Zip/Postal Code	<input type="text" value="CA"/>
Phone No	<input type="text" value="91342"/>
Email	<input type="text" value="fsmith@hotmail.com"/>
* Description of damage or injury	<input type="text" value="Fred was a passenger in the production vehicle. Neck is stiff/sore, arm is injured."/>

[Save As Draft](#)[Back](#)[Next](#)[Close](#)

Click on "Next" to proceed to the next screen.



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Is there another vehicle
involved? Yes No

[Save As Draft](#)[Back](#)[Next](#)[Close](#)© 2011 Aon/Albert G. Ruben Insurance Services, Inc. a.ruben@aon.com

If you select "No", you may proceed to the next screen. You may also navigate back to the previous screen (if applicable) at any time. If you select "Yes", more questions will appear for you to fill in:



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Is there another vehicle
involved?

Yes No

Driver's First Name

Martha

Driver's Last Name

Burns

Country

United States

State

CALIFORNIA

Address

474 Birch St

City

Alhambra

Zip/Postal Code

92303

Phone No

818 555 4444

Email

mburns@hotmail.com

If you choose "Yes" for the "Is the registered owner of the vehicle different than the driver?", additional questions will appear for you to fill in.

Is the registered owner of the Yes No
vehicle different than the
driver?

Owner's First Name	<input type="text" value="Frank"/>
Owher's Last Name	<input type="text" value="Ellison"/>
Country	<input type="text" value="United States"/> ▼
State	<input type="text" value="CALIFORNIA"/> ▼
Address	<input type="text" value="376 Oak St"/>
City	<input type="text" value="Pasadena"/>
Zip/Postal Code	<input type="text" value="91606"/>
Phone No	<input type="text" value="818 555 3333"/>
Email	<input type="text" value="fellison@yahoo.com"/>

Continue completing the form:

Make	<input type="text" value="Toyota Corolla"/>
Body Type	<input type="text" value="4-door sedan"/>
Year	<input type="text" value="2010"/>
* Description of damage or injury	<input type="text" value="Rear passenger panel"/>
Estimate of Repair Costs	<input type="text" value="3000"/>
Name of other party's Insurance Company or Insurance Agent	<input type="text" value="State Farm Insurance"/>
Contact Name	<input type="text" value="Bill Tellman"/>
Contact Phone	<input type="text" value="818 555 2323"/>
Contact Email	<input type="text" value="btellman@sfi.com"/>
Policy No.	<input type="text" value="ABC123"/>
Claim No.	<input type="text" value="4876530-09"/>

Click on "Next" to proceed to the next screen.

Automobile Accident Reporting Form step 4

Is there property damage (other Yes No than another vehicle) involved (e.g. building or structure)?

This is the final screen. If you select "Yes", more questions will appear for you to fill in:

Automobile Accident Reporting Form step 4

Is there property damage (other Yes No
than another vehicle) involved
(e.g. building or structure)?

Name of property owner	<input type="text" value="City of Los Angeles"/>
Country	<input type="text" value="United States"/>
State	<input type="text" value="CALIFORNIA"/>
Address	<input type="text" value="1234 Alameda St."/>
City	<input type="text" value="Los Angeles"/>
Zip/Postal Code	<input type="text" value="90016"/>
Phone No	<input type="text"/>
Email	<input type="text"/>
* Description of damage	<input type="text" value="Fire hydrant was sheared off at intersection."/>

[Save As Draft](#) [Back](#) [Close](#) [Submit](#)

At this point, you may click on “Save as Draft” if you are not ready to submit the claim, or if all the required fields have not been completed. You may navigate back to the other pages. You may also choose to click on “Submit”, which will send the form to Aon personnel for review. **The “Submit” button is located on the last page of the claims form.**

NOTE: Once the first notice of claim has been submitted, you will only be able to view the claim – you will not be able to edit any of the information.

If you click on “Save as Draft”, you will be taken to the first page of the claim form:

[Eileen insert screenshot when available]



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Declaration

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First Notice of Claim

Production Company: Area 51 Films

Title of Production: Claim Test 1

Production Ref: ABC

Please enter contact information for person who we can contact about this claim:

* First Name: John

* Last Name: Smith

* Phone: 888 555 1212

* Email: jsmith@companya.com

* Type of Claim: Claim Involving Auto(s) Others

* Date of Loss: 10/9/2011

Location of Loss:

* Country: United States

* State: CALIFORNIA

Address: 1234 Main St.

* City: Los Angeles

* Complete Description of loss: Production vehicle struck car at intersection of 8th and Figueroa downtown. Car was turning left, light was yellow, just turning red, and production vehicle struck

Save As Draft

Next

Delete

Close

Add Attachment

View Attachment

You have a number of choices at this point:

- You may navigate through all of the pages, editing the information as you wish
- You may delete the claim record by clicking on "Delete"
- You may add an attachment to the claim, such as a police report, to the claim record by clicking on "Add Attachment"
- If any attachments exist, you may view them from this screen by clicking on "View Attachment"
- You may submit the claim record to Aon.

Adding an Attachment to your claim

When you click on “Add Attachment”, the website will display the following screen:

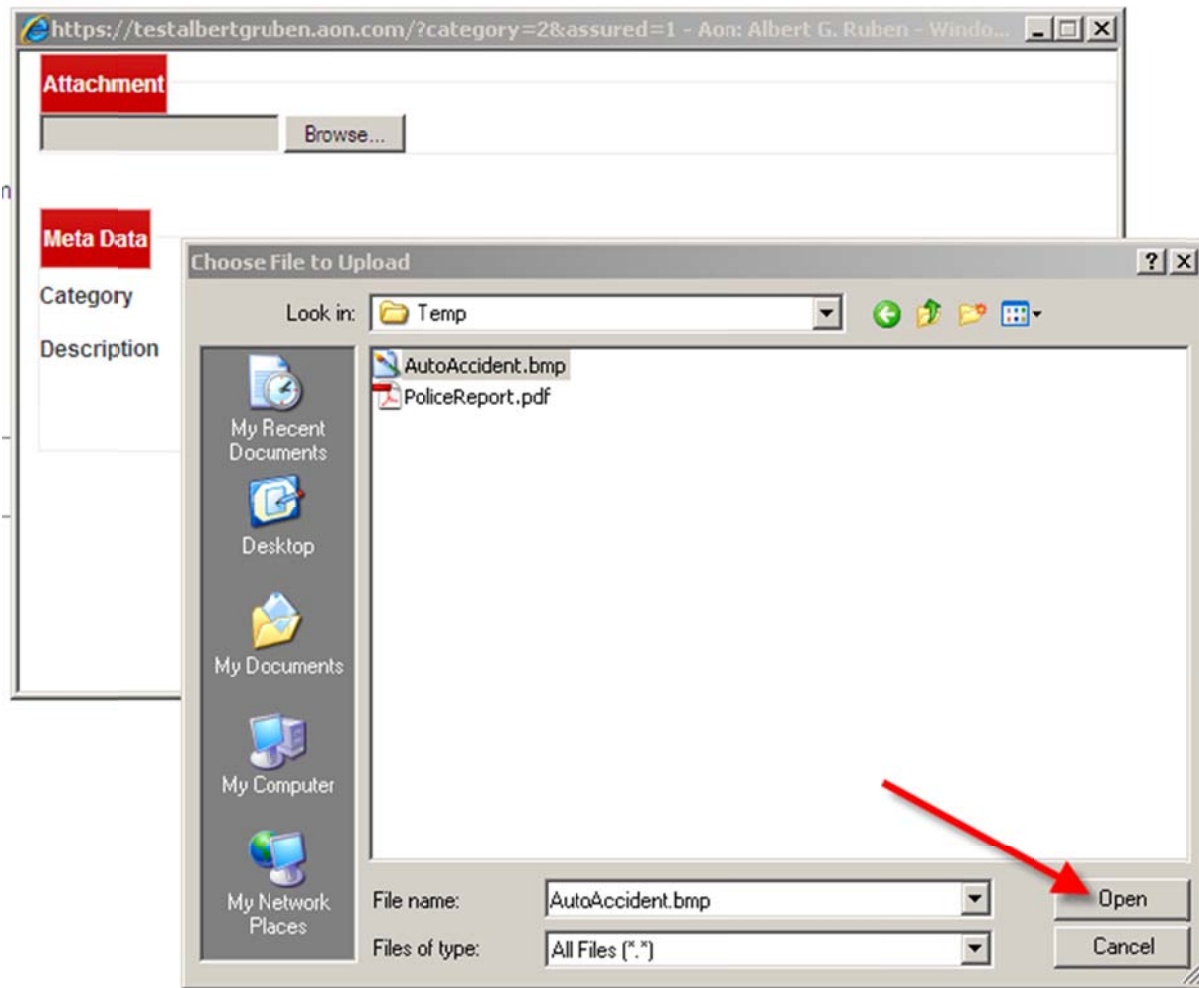


The screenshot shows a web browser window with the URL <https://testalbertgruben.aon.com/?category=2&assured=1>. The browser title is "Aon: Albert G. Ruben - Windo...". The page content is divided into two main sections:

- Attachment:** A red header bar is followed by a text input field and a "Browse..." button.
- Meta Data:** A red header bar is followed by two fields:
 - Category:** A dropdown menu with "Claim" selected.
 - Description:** A large text area with a vertical scrollbar.

At the bottom of the form, there are two buttons: "Upload" (with a red asterisk icon) and "Close" (with a red 'x' icon).

Click on the “Browse” button to navigate to the document you wish to attach to the claim. This can be a Word document, a .pdf, a scan of the police report or a picture of the damage to the vehicles.



Click on "Open" to select the document. When you are directed back to the first screen, complete the description field for easy reference:

Attachment

C:\Temp\AutoAccident. Browse...

Meta Data

Category Claim

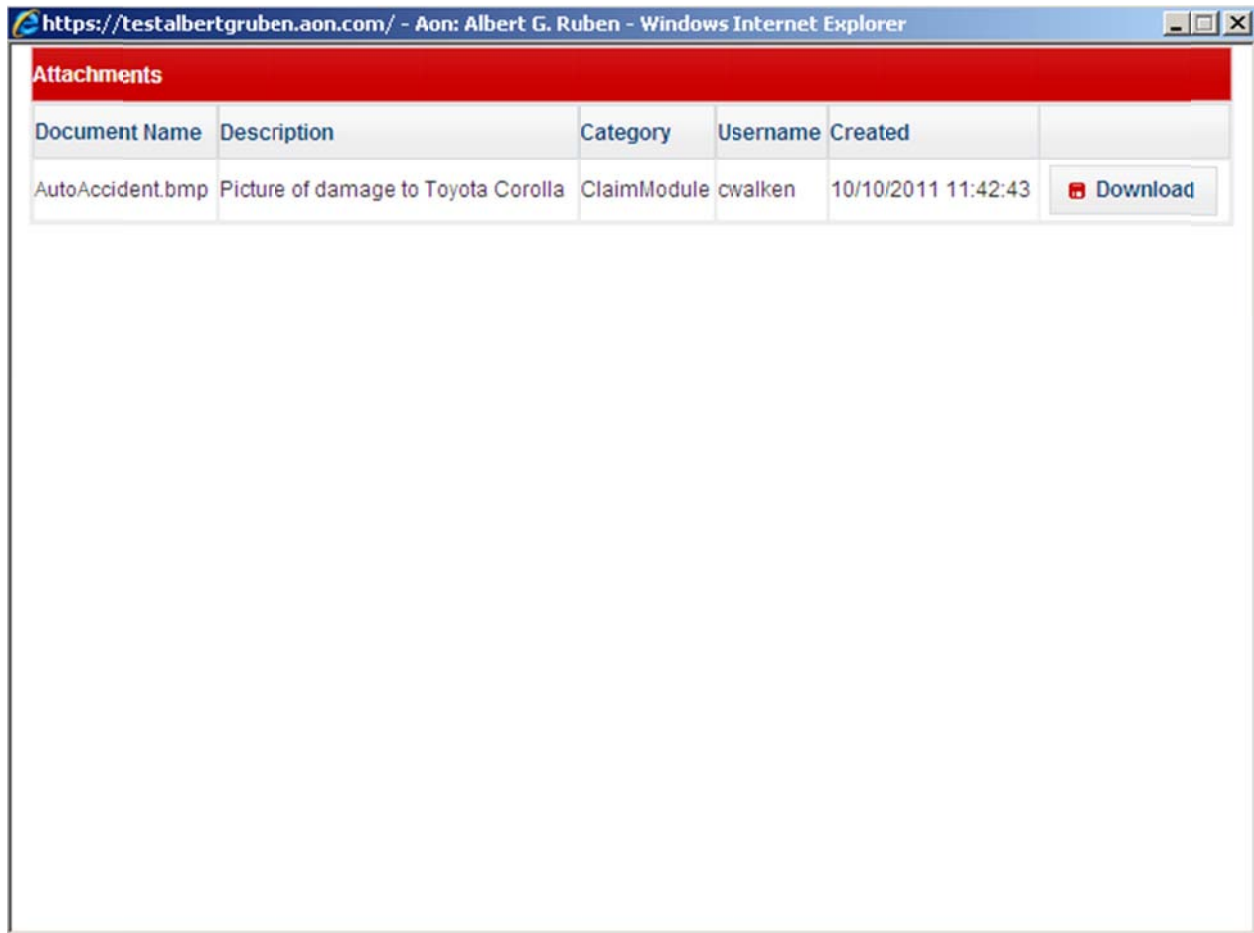
Description Picture of damage to Toyota Corolla

Upload Close

Click on "Upload", then "Close".

If you want to see the attachment again, open the form and Attachments".

click on "View



Click on "Download" to view the attachment.

View existing claims

Navigate to the Declarations Dashboard and find the declaran to which the claim is associated. ➤



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Declaration
 Assured: Producer: Status:

- Draft
- Submitted
- Approved

Declaration Dashboard																
								Aon		Production Company						
Dec ID	Prod ID	Prod Title	Assured	Prod Ref	Declaration Date	Prod Start Date	Status	Awd Letter	Cert	Budget	Storyboard	Resume	Schedule	WC Co	# Claims	Claim
408	1033605	Claim Test 1	Omnicom Group Inc.	ABC	10/4/2011 17:16:34	10/5/2011 20:59:59	Approved								1	Create

If there is only one claim associated with the declaration, clicking on the number “1” will take you directly into the claim record.

If there is more than one claim, click on the number and you will be taken to a list of all of the claims associated with that declaration.

Declaration Dashboard																
								Aon		Production Company						
Dec ID	Prod ID	Prod Title	Assured	Prod Ref	Declaration Date	Prod Start Date	Status	Awd Letter	Cert	Budget	Storyboard	Resume	Schedule	WC Co	# Claims	Claim
408	1033605	Claim Test 1	Omnicom Group Inc.	ABC	10/4/2011 17:16:34	10/5/2011 20:59:59	Approved								3	Create

Claims Dashboard								
Open Claim	Assured	Date Of Loss	Job Title	Job No	Production Company	Agency	Advertiser	Status
460	Omnicom Group Inc.	10/8/2011 20:59:59	Claim Test 1	1033605	Area 51 Films	BBDO New York	Brinker International - On The	Acknowledged
463	Omnicom Group Inc.	10/10/2011 20:59:59	Claim Test 1	1033605	Area 51 Films	BBDO New York	Brinker International - On The	Submitted
464	Omnicom Group Inc.	10/10/2011 20:59:59	Claim Test 1	1033605	Area 51 Films	BBDO New York	Brinker International - On The	Draft

Click on any of the claim numbers on the far left to open up the claim document.