$\mathrm{The} LDS\mathrm{Group}$

Loss Deficiency Surety Insurance Company, Inc. (LDSIC) understands the impact that the devastating floods in south Louisiana will have on thousands of policyholders and their families. Many of our employees, families and friends have also been impacted. Therefore, we have implemented processes so that we can provide excellent Gap claims service as we work through this catastrophic event.

The following information is required to expedite filing a Gap claim for your flooded vehicle:

- 1. Claim form (Attached)
- 2. Copy of finance agreement
- 3. Lienholder and account number
- 4. Copy of payment history
- 5. Insurance deductible amount
- 6. Copy of insurance check

Please remember that a Gap claim cannot be calculated or paid until LDSIC receives a copy of your insurance payment.

Please submit all the above documents/information (items 1-6) at the same time, if possible.

Scan/email documents to: Idsgapclaims@sgintl.com

Or fax documents to: 225-800-5910

Or mail documents to: LDSIC August 2016 Gap Claim P.O. Box 83480 Baton Rouge, La. 70884-3480

Thank you,

LDSIC Gap Claims Department 1-844-474-3950

CLAIM FORM - ONLY FOR "AUGUST 2016 FLOOD" CLAIMS

Please Print Policyholder's Name:	
LDSIC Policy Number:	or Last six VIN#:
Yr: Make: Model:	Selling Dealer:
Daytime Contact Phone # ()	
E-Mail Address:	
Date of Loss: Lienholder:	Acct #:
A legible copy or original FINANCE AGI lienholder or dealership).	REEMENT or CONTRACT. (you may obtain from
PAYMENT HISTORY from purchase date. (you may obtain from lienholder).	
Primary Ins. Co.; Name:	Deductible: \$
PROOF of amount paid by Insurance Con	npany. (copy of check, amount posted on payment

PROOF of amount paid by Insurance Company. (copy of check, amount posted on payment history or copy of insurance company check print screen).

The above information is being provided to Loss Deficiency Surety Insurance Company, Inc. Any person who KNOWINGLY and WITH INTENT to DEFRAUD any insurance company or other person, files a statement of claim containing any materially false information, or conceals for purpose of misleading, information concerning any fact, material thereto, COMMITS A FRAUDULENT ACT, which is a crime, subject to criminal prosecution and civil penalties.

POLICYHOLDER SIGNATURE

DATE

E-mail claim form to: dsgapclaims@sgintl.com

Or phone: 1-844-474-3950

Or fax to: 225-800-5910

Or Mail to: LDISC August 2016 Flood Claim P.O. Drawer 83480 Baton Rouge, La. 70884-3480