



Republic of the Philippines  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue  
Manila



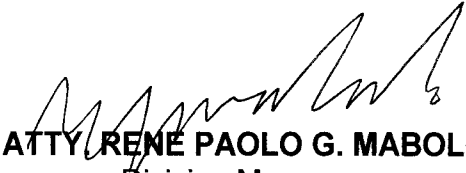
## **ADVISORY**

Please be informed that as of September 1, 2016, the **Insurance Memorandum Circular No. 2016-01**, also known as the **Rules of Procedure for Small Claims Cases in the Insurance Commission**, took effect. Those with claims amounting to Php200,000.00 and below (exclusive of interests and other fees) may now avail of this new method as the Insurance Commission attempts to expedite the resolution of such cases.

You may also download our printable *pro-forma* forms for your convenience. To learn more about this new process of handling claims, feel free to contact the Claims Adjudication Division (CAD) at 523-8461 to 70 local 104 or through email at [publicassistance@insurance.gov.ph](mailto:publicassistance@insurance.gov.ph).

Please be guided accordingly.

Thank you.

  
**ATTY. RENE PAOLO G. MABO**  
Division Manager  
Claims Adjudication Division



Republic of the Philippines  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue  
Manila



**INSURANCE MEMORANDUM**  
**CIRCULAR NO. 2016-01**

**RULES OF PROCEDURE FOR SMALL CLAIMS CASES  
IN THE INSURANCE COMMISSION**

Pursuant to the provisions of Sections 437, 438 and 439 of Insurance Code of the Philippines, as amended by R.A. No. 10607, and Section 55 of the Pre-Need Code of the Philippines, the following Rules of Procedure for Small Claims Cases are hereby adopted and promulgated:

**SEC. 1. *Title.*** This Rules shall be known as "The Rules of Procedure for Small Claims Cases in the Insurance Commission."

**SEC. 2. *Scope.*** This Rules shall govern hearings of such claims and complaints in actions before the Insurance Commission where the amount being claimed or sued upon does not exceed Two Hundred Thousand Pesos (P200,000.00) in any single claim, exclusive of interest, costs, and attorney's fees. Except as to the amount of actual damages, legal interest, attorney's fees and costs, which include filing fees and litigation expenses, no other form of damages shall be recoverable

**SEC. 3. *Definition of Terms.***—For purposes of this Rule:

- (a) *Complainant* refers to the party, whether a natural or juridical person, who initiated a small claims action against an insurance company, pre-need company, or mutual benefit association doing business in the Philippines, for any loss, damage or liability for which an insurer may be answerable under any kind of policy or contract of insurance, or for which such insurer may be liable under a contract of suretyship, or for which a reinsurer may be sued under a contract of reinsurance it may have entered into, or for which a pre-need company may be held liable under any pre-need policy it has issued, or for which a mutual benefit association may be held liable under the membership certificates it has issued to its members. The term also includes a respondent who has filed a compulsory counterclaim;
- (b) *Respondent* is the insurance company, pre-need company, or mutual benefit association against whom the relief sought is directed. The term also includes a complainant against whom a compulsory counterclaim is filed;
- (c) *Person* is a natural individual, corporation, partnership, limited liability partnership, association, or other juridical entity endowed with personality by law;

- (d) *Motion* means a party's request, written or oral, formal or informal to the Commission for an order or other action;
- (e) *Good cause* means circumstances sufficient to justify the requested order or other action, as determined by the hearing officer;
- (f) *Affidavit* means a written statement or declaration of facts of personal knowledge that are sworn to or affirmed to be true;
- (g) *Actionable Document* refers to the insurance policy, contract of insurance, contract of suretyship, contract of reinsurance, pre-need contract, or certificate of insurance for which a respondent may be held answerable. It also includes an affidavit executed by the complainant stating why the complainant cannot attach a copy of the policy or any of the required documents;
- (h) *Next-of-kin* refers to relatives who share in the estate according to the statute of distribution including those claiming per stripes or by representation;
- (i) *Commission* refers to the Insurance Commission and its District Offices; and
- (j) *Hearing Officer* refers to a lawyer/s under the Claims Adjudication Division and the District Offices with the position of at least IC Attorney I;
- (k) *Compulsory Counterclaim* is limited to claims for attorney's fees and costs by the respondent against a complainant.

**SEC. 4. Commencement of Small Claims Action.**—A small claims action under this Rules may be commenced by any of the following, to wit:

- a. By filing with the Commission of an accomplished and verified Statement of Claim (*Form 1-IC*) in duplicate, accompanied by a Certification of Non-forum Shopping (*Form 1-A-IC*), and two (2) photocopies of the actionable document/s subject of the claim, written notice of claim to the respondent with proof of service, written denial of the claim made by the respondent, as well as the affidavits of witnesses and other evidence to support the claim. No evidence shall be allowed during the hearing which was not attached to or submitted together with the Claim, unless good cause is shown for the admission of additional evidence; or
- b. By filing a verified complaint with a Certificate of Non-Forum Shopping prepared by a lawyer provided that the complaint states the following material allegations:
  - i. The names and addresses of the parties;
  - ii. A brief statement of facts narrating how and when the loss occurred;
  - iii. The grounds relied upon in support of the claim;

- iv. The amount of the claim which should not exceed Two Hundred Thousand Pesos (P200,000.00) exclusive of interest, costs, and attorney's fees;
- v. An allegation that there is final denial of the claim made by the respondent; and
- vi. That there is no pending mediation conference in the Public Assistance and Mediation Division of this Commission.
- vii. Accompanied by photocopies of the actionable document/s subject of the claim, written notice of claim to the respondent with proof of service, as well as the affidavits of witnesses and other evidence to support the claim.

SEC. 5. *Joinder of Claims.* Complainant may join in a single statement of claim one or more separate small claims against a respondent provided that the total amount claimed, exclusive of interest and costs, does not exceed P200,000.00.

SEC. 6. *Affidavits.*—The affidavits submitted under this Rule shall state only facts of direct personal knowledge of the affiants to be admissible as evidence.

SEC. 7. *Payment of Filing Fees.* Unless the complainant is allowed to litigate as an indigent, the basis in determining the filing fee is the principal amount claimed, exclusive of interest and attorney's fees, is as follows:

- i. Less than P100,000.00 ----- P1,000.00
- ii. P100,000.00 or more but less than P200,000.00 ----- P2,000.00

Plus an amount equivalent to one percent (1%) of the filing fee but in no case lower than Ten Pesos (P10.00) to be collected as Legal Research Fund Fee in accordance with R.A. No. 3870, as amended by Presidential Decree No. 1856 dated December 26, 1982

A claim filed with a Motion to Sue as Indigent (*Form 6-IC*) shall be referred to the Division Manager of the Claims Adjudication Division or the District Offices for immediate action. If the motion is granted, the case shall be assigned to the Hearing Officer designated to hear small claims cases and the filing fees shall be a lien on any judgment rendered in the case favorably to the indigent litigant, unless the Commission otherwise provides. If the motion is denied, the complainant shall be given five (5) days within which to pay the docket fees, otherwise, the case shall be dismissed without prejudice.

SEC. 8. *Payment of Summons Fee.* In addition to the payment of the filing fee, the complainant shall pay the amount of P1,000.00. as fee for the service of summons and processes. In no case shall a complainant, even if declared an indigent, be exempt from the payment of the Summons Fee.

SEC. 9. *Dismissal of the Claim.* After the Hearing Officer or Division Manager determines that the case falls under this Rule, the Commission may motu proprio order the dismissal of the case at any time based on the allegations of the Statement of Claim and evidence attached thereto for any of the grounds for the dismissal of a

complaint under Rule 6 of Insurance Memorandum Circular No. 2014-01 and Rule 16 of the Rules of Court.

SEC. 10. *Summons and Notice of Hearing.*—If no ground for dismissal is found, upon payment of the Filing Fee and Summons Fee, the Commission shall forthwith issue a Summons (*Form 2-IC*) on the day of receipt of the Statement of Claim, directing the respondent to submit a verified Response.

The Commission shall also issue a Notice (*Form 3-IC*) to both parties, directing them to appear before it on a specific date and time for hearing, with a warning that no unjustified postponement shall be allowed, as provided in Section 19 of this Rule.

The Summons and Notice to be served on the respondent shall be accompanied by a copy of the Statement of Claim and documents submitted by the complainant, and a copy of the Response (*Form 4-IC*) to be accomplished by the respondent. The Notice shall contain an express prohibition against the filing of a motion to dismiss or any other motion under Section 13 of this Rule.

SEC. 11. *Response.* — The respondent shall file with the Commission and serve on the complainant within a non-extendible period of ten (10) days from receipt of summons, a verified Response by any of the following means, to wit:

- a. By filing with the Commission and serving on the complainant a duly accomplished and verified Response (*Form 4-IC*). The Response shall be accompanied by photocopies of the written denial of complainant's claim with the grounds for its denial stated therein, the adjuster's report, if any, as well as affidavits of witnesses and other evidence in support thereof. No evidence shall be allowed during the hearing which was not attached to or submitted together with the Response, unless good cause is shown for the admission of additional evidence. The grounds for the dismissal of the claim, under Rule 6 of Insurance Memorandum Circular No. 2014-01 and Rule 16 of the Rules of Court, should be pleaded; or
- b. By filing a verified Response prepared by a lawyer provided that the response contains the following, to wit:
  - i. The names and addresses of the parties;
  - ii. A brief statement of facts narrating how and when the loss occurred;
  - iii. The grounds relied upon in the denial of the claim;
  - iv. Any of the grounds for the dismissal of an action under Rule 6 of Insurance Memorandum Circular No. 2014-01 and under Rule 16 of the Rules of Court, if any; and
  - v. Accompanied by photocopies of the written denial of complainant's claim with the grounds for its denial stated therein, the adjuster's report, if any, as well as affidavits of witnesses and other evidence in support thereof.

**SEC. 12. *Effect of Failure to File Response.*** Should the respondent fail to file his Response within the required period, the Commission shall render judgment as may be warranted by the Statement of Claim and other evidence attached.

**SEC. 13. *Prohibited Pleadings and Motions.*** The following pleadings, motions, or petitions shall not be allowed in the cases covered by this Rule:

- (a) Motion to dismiss the complaint;
- (b) Motion for a bill of particulars;
- (c) Motion for new trial, or for reconsideration of a judgment, or for reopening of trial;
- (d) Petition for relief from judgment;
- (e) Motion for extension of time to file pleadings, affidavits, or any other paper;
- (f) Memoranda;
- (g) Petition for *certiorari*, *mandamus*, or prohibition against any interlocutory order issued by the Commission;
- (h) Motion to declare the respondent in default;
- (i) Dilatory motions for postponement;
- (j) Reply;
- (k) Third-party complaints; and
- (l) Interventions.

**SEC. 14. *Availability of Forms; Assistance by Personnel.***—The personnel of the Claims Adjudication Division and the District Offices shall provide such assistance as may be requested by a complainant or a respondent regarding the availability of forms and other information about the coverage, requirements as well as procedure for small claims cases.

**SEC. 15. *Appearance.*** — The parties shall appear at the designated date of hearing personally.

Appearance through a representative may be allowed for a valid cause. The representative of an individual-party must not be a lawyer, and must be related to or next-of-kin of the individual-party. Juridical entities shall not be represented by a lawyer in any capacity.



The representative must be authorized under a Special Power of Attorney (*Form 7-IC*) to enter into an amicable settlement of the dispute and to enter into stipulations or admissions of facts and of documentary exhibits.

SEC. 16. *Appearance of Attorneys Not Allowed* - No attorney shall appear in behalf of or represent a party at the hearing, unless the attorney is the complainant.

If the Hearing Officer determines that a party cannot properly present his/her claim or defense and needs assistance, the Hearing Officer may allow another individual who is not an attorney to assist that party upon the latter's consent.

SEC. 17. *Non-appearance of Parties.*—Failure of the complainant to appear shall be cause for the dismissal of the claim without prejudice. The respondent who appears shall be entitled to judgment only on a compulsory counterclaim.

Failure of the respondent to appear shall have the same effect as failure to file a Response under Section 12 of this Rule.

Failure of both parties to appear shall cause the dismissal of both the claim and counterclaim without prejudice.

SEC. 18. *Postponement When Allowed.* A request for postponement of a hearing may be granted only upon proof of the physical inability of the party to appear before the Commission on the scheduled date and time and upon payment of postponement fee in the amount of Five Hundred Pesos (P500.00) as provided under IC Circular Letter No. 2014-15. A party may avail of only one (1) postponement.

SEC. 19. *Duty of the Hearing Officer* At the beginning of the session, the hearing officer shall read aloud a short statement explaining the nature, purpose and the rule of procedure of small claims cases.

SEC. 20. *Hearing.* The Hearing Officer shall endeavor to bring the parties to an amicable settlement of their dispute. Any settlement of the dispute shall be reduced into writing, signed by the parties and submitted to the Division Manager for approval (*Form 8-IC*).

Settlement discussions shall be strictly confidential and any reference to any settlement made in the course of such discussions shall be punishable by contempt.

Sec. 21. *Failure of Settlement.* — If efforts at settlement fail, the hearing shall proceed in an informal and expeditious manner and shall be terminated within five (5) hearing days.

SEC. 22. *Decision.* The Commission shall render its decision within thirty (30) days from the last scheduled hearing based on evidence presented. The decision shall immediately be entered in the docket for small claims cases and a copy served to the parties.

The decision shall be final and unappealable.

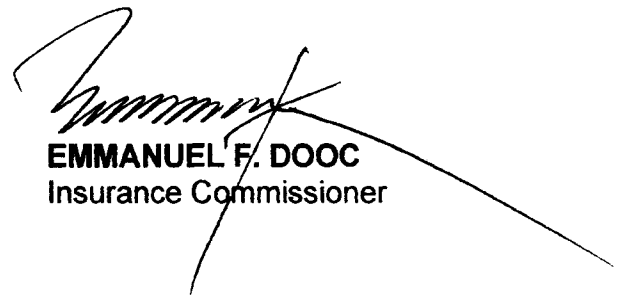


SEC. 23. *Execution.*— Upon motion (Form 11-IC) by the interested party, a Pre-Execution Conference shall be set by the Hearing Officer and an Order of execution and satisfaction of judgement shall be executed.

SEC. 24. *Applicability Insurance Memorandum Circular No. 2014-01 and of the Rules of Civil Procedure.*—*Insurance Memorandum Circular No. 2014-01 and the Rules of Civil Procedure* shall be suppletory insofar as they are not inconsistent with this Rule.

SEC.25. *Separability Clause.* If any provision of this Code or any part hereof be declared invalid or unconstitutional, the remainder of the law or other provisions not otherwise affected shall remain valid and subsisting.

SEC. 26. *Effectivity.*— This Circular shall be published in any of the top three (3) major broadsheet newspapers circulated nationwide and shall take effect on September 1, 2016.



**EMMANUEL F. DOOC**  
Insurance Commissioner

Republic of the Philippines  
Department of Finance  
INSURANCE COMMISSION  
1071 U.N. Avenue, Manila

**CLAIMS ADJUDICATION DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
Complainant/s

-versus-

I.C. (CAD) CASE NO. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Respondent/s

x-----x

HEARING OFFICER \_\_\_\_\_  
STENOGRAPHER \_\_\_\_\_

DATE: \_\_\_\_\_  
TIME: \_\_\_\_\_  
HEARING COMMENCED: \_\_\_\_\_  
HEARING ADJOURNED \_\_\_\_\_

**APPEARANCES**

\_\_\_\_\_  
For the Complainant

\_\_\_\_\_  
For the Respondent

**MINUTES**

Republic of the Philippines  
Department of Finance  
INSURANCE COMMISSION  
Claims Adjudication Division

\_\_\_\_\_  
Date

RECEIPT OF COMPLAINT

Sir/ Madam:

The complaint entitled:

“ \_\_\_\_\_ ” is:

\_\_\_\_\_ Sufficient in form and substance;

\_\_\_\_\_ Returned for being insufficient in form and substance for the following reason/s:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTY. RENE PAOLO G. MABOLO  
OIC, Claims Adjudication Division

IC-LCA-DP-001-F-02 REV. 0

Republic of the Philippines  
Department of Finance  
INSURANCE COMMISSION  
Claims Adjudication Division

\_\_\_\_\_  
Date

RECEIPT OF COMPLAINT

Sir/ Madam:

The complaint entitled:

“ \_\_\_\_\_ ” is:

\_\_\_\_\_ Sufficient in form and substance;

\_\_\_\_\_ Returned for being insufficient in form and substance for the following reason/s:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTY. RENE PAOLO G. MABOLO  
OIC, Claims Adjudication Division

IC-LCA-DP-001-F-02 REV. 0



Republic of the Philippines  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

**ORDER OF PAYMENT**

OPF No. CAD-2016-08-00014

2016-08-17

Date

To the Cashier:

Please issue Official Receipt in favor of \_\_\_\_\_ for payment of:

Other Certifications (1)	500.00
LRF	0.00
Total Fee	500.00
Total LRF	0.00
Total	500.00

Gladys A Delfin  
Authorized Personnel

Atty. Rene Paolo G. Mabolo  
Division Chief

# PHILIPPINE POSTAL CORPORATION

Form No. 1548-A

## REGISTRY RETURN RECEIPT

Penalty for official use to avoid payment  
of postage is fine of P300 or six months imprisonment



Postmark of Delivery Office

Name of Sender \_\_\_\_\_

House No. / Street/or P.O Box No. \_\_\_\_\_

Zip Code/Municipality/City Province \_\_\_\_\_

**SENDER OF REGISTERED ARTICLE MAY USE THIS SPACE  
FOR THE PRIVATE FILING GUIDE**

**FILE CASE ON ACCOUNT  
NUMBER**

# REGISTRY RETURN RECEIPT

RECEIVED from the postmaster at \_\_\_\_\_

Registered Letter/Parcel No. \_\_\_\_\_ Posted at \_\_\_\_\_

Addressed to \_\_\_\_\_

(Name of Addressee)

Date \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Signature of Addressee Over Printed Name)

\_\_\_\_\_  
(Signature of Addressee's agent/Authorized Representative)

The Sender shall completely and legibly fill out the sender's information (front side face of this RRR) and Registry No. and addressee's name at the back.

A Registered article must be delivered under receipt to (under signature by) the addressee or to his/her authorized representative, except for Restricted Registered Mail which should be delivered to

The Delivery Office shall postmark this RRR and mail back to the Postmaster of the post office of mailing via Ordinary Mail.

**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_  
Complainant

IC CAD CASE No.:  
\_\_\_\_\_

\_\_\_\_\_  
Respondent.

x----- x

**STATEMENT OF CLAIM**  
**(HABLA NG PAGINGIL)**

1. The personal circumstances of the parties are as follows:  
*(Ang bawat panig ay ang mga sumusunod)*

NAME OF COMPLAINANT/S	SEX	AGE	CIVIL STATUS
<i>(Pangalan ng Naghahabla)</i>	<i>(Kasarian)</i>	<i>(Edad)</i>	<i>(Katayuang Sibil)</i>

(Put a check on any of the following)

*(Pumili sa mga sumusunod at lagyan ng tsek)*

INDIVIDUAL	CORPORATION	PARTNERSHIP
<input type="checkbox"/> <i>(Tao/Indibidwal)</i>	<input type="checkbox"/> <i>(Korporasyon)</i>	<input type="checkbox"/> <i>(Bakasan)</i>
<input type="checkbox"/> COOPERATIVE	<input type="checkbox"/> SOLE PROPRIETORSHIP	
<i>(Kooperatiba)</i>	<i>(Solong Pagmamay-ari)</i>	

COMPLAINANT'S HOME  
ADDRESS:

*(Pahatirang Sulat sa Bahay ng Naghahabla)*

(City) \_\_\_\_\_

*(Lungsod)* \_\_\_\_\_ Zip Code \_\_\_\_\_

(Province, if applicable) \_\_\_\_\_

*(Lalawigan, kung meron)* \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_

*(Telepono Blg.)* \_\_\_\_\_ *(Selpon Blg.)* \_\_\_\_\_

PLACE OF WORK: \_\_\_\_\_

*(Lugar ng Pinagtatrabahuan)*

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_

*(Telepono Blg.)* \_\_\_\_\_ *(Selpon Blg.)* \_\_\_\_\_

NAME OF COMPLAINANT'S REPRESENTATIVE:

\_\_\_\_\_

if applicable (must be a non-lawyer)

*(Pangalan ng Kinatawan:)*

*(kung meron) [dapat hindi abogado]*

HOME ADDRESS: (City) \_\_\_\_\_

*(Pahatirang Sulat sa Bahay) (Lungsod)* \_\_\_\_\_ Zip Code \_\_\_\_\_

*(Province, if applicable)* \_\_\_\_\_

*(Lalawigan, kung meron)* \_\_\_\_\_ Zip Code \_\_\_\_\_



Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
(Telepono Blg.) (Selpon Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_  
(Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
(Telepono Blg.) (Selpon Blg.)

NAME OF RESPONDENT/S \_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_ CIVIL STATUS \_\_\_\_\_  
(Pangalan ng Hinahabla) (Kasarian) (Edad) (Katayuang Sibil)

INDIVIDUAL  CORPORATION  PARTNERSHIP  
(Tao/Indibidwal) (Korporasyon) (Bakasan)

COOPERATIVE  SOLE PROPRIETORSHIP  
(Kooperatiba) (Solong Pagmamay-ari)

RESPONDENT'S HOME ADDRESS:  
(Pahatirang Sulat sa Bahay ng Hinahabla)

(City) \_\_\_\_\_ Zip Code \_\_\_\_\_  
(Lungsod)

(Province, if applicable) \_\_\_\_\_ Zip Code \_\_\_\_\_  
(Lalawigan, kung meron)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
(Telepono Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_  
(Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
(Telepono Blg.) (Selpon Blg.)

NAME OF RESPONDENT'S REPRESENTATIVE:

\_\_\_\_\_

if applicable (must be a non-lawyer)

(Pangalan ng Kinatawan:)

(kung meron) [dapat hindi abogado]

HOME ADDRESS: (City) \_\_\_\_\_

(Pahatirang Sulat sa Bahay) (Lungsod)

\_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_

(Lalawigan, kung meron)

\_\_\_\_\_ Zip Code

Telephone No. \_\_\_\_\_

(Telepono Blg.)

Cellphone No. \_\_\_\_\_

(Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_

(Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_

(Telepono Blg.)

Cellphone No. \_\_\_\_\_

(Selpon Blg.)

**If more than one (1) respondent, list next respondent here:**

**(Kung higit sa isa (1) ang Hinahabla, ilagay ang susunod na hinahabla rito:)**

NAME OF RESPONDENT/S      SEX      AGE      CIVIL STATUS  
(Pangalan ng Hinahabla)    (Kasarian)    (Edad)    (Katayuang Sibil)

INDIVIDUAL     CORPORATION     PARTNERSHIP  
(Tao/Indibidwal)      (Korporasyon)      (Bakasan)

COOPERATIVE       SOLE PROPRIETORSHIP  
(Kooperatiba)      (Solong Pagmamay-ari)

RESPONDENT'S HOME ADDRESS:

(Pahatirang Sulat sa Bahay ng Hinahabla)

(City) \_\_\_\_\_

(Lungsod)

\_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_

*(Lalawigan, kung meron)*

Zip Code

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
*(Telepono Blg.) (Selpon Blg.)*

PLACE OF WORK: \_\_\_\_\_  
*(Lugar ng Pinagtatrabahuan)*

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
*(Telepono Blg.) (Selpon Blg.)*

NAME OF RESPONDENT'S REPRESENTATIVE:

\_\_\_\_\_  
if applicable (must be a non-lawyer)  
*(Pangalan ng Kinatawan:)*  
*(kung meron) [dapat hindi abogado]*

HOME ADDRESS: (City) \_\_\_\_\_ Zip Code \_\_\_\_\_  
*(Pahatirang Sulat sa Bahay) (Lungsod)*

(Province, if applicable) \_\_\_\_\_ Zip Code \_\_\_\_\_  
*(Lalawigan, kung meron)*

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
*(Telepono Blg.) (Selpon Blg.)*

PLACE OF WORK: \_\_\_\_\_  
*(Lugar ng Pinagtatrabahuan)*

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
*(Telepono Blg.) (Selpon Blg.)*

**\*Note:** *If you need more space, you can write at the back of this Form.*  
**(\*Tala:** *Kung kailangan mo ng karagdagang patlang, maaari mong isulat sa likod ng Form na ito.)*

2. Complainant claims the respondent denied his claim in the amount of P\_\_\_\_\_.  
(Ang Hinahabla ay hindi nagbayad ng claim sa Naghahabla ng halagang)

(a) Why does the complainant have a claim against respondent?  
(Bakit ang Naghahabla ay may claim laban sa Hinahabla?)

\_\_\_\_\_. (If you need more space, please use the back page). (Kung kailangan mo ng karagdagang patlang, maaaring gamitin ang likod ng pahinang ito.)

(b) When did this happen?  
(Kailan ito nangyari?)

Date: \_\_\_\_\_  
(Petsa)

If no specific date, give the time period:

(Kung walang tiyak na petsa, ibigay ang tantiyang panahon)

Date started: \_\_\_\_\_  
(Petsa nagsimula)

Through: \_\_\_\_\_  
(Hanggang)

(c) How did you compute the claim? (Do not include court costs or fees)

\_\_\_\_\_.  
(Paano mo kinuwenta claim?) [Hindi kasama ang bayad sa pagpapatala sa hukuman.]

3. (a) Did you ask the respondent to pay you before you filed this case?  
(Siningil mo ba ang Hinahabla bago ka nagsampa ng kasong ito?)

Yes  
(Oo)

No  
(Hindi)

If no, explain:

\_\_\_\_\_  
(Kung hindi, ipaliwanag)

(b) How did you ask the respondent?  
*Paano mo siningil ang Hinahabla?*

In person  
*(Sa kanya mismo)*

By phone  
*(Sa telepono)*

In writing  
*(Sa sulat)*

Others (please specify) \_\_\_\_\_  
*(Iba pa) [pakisulat kung paano]*

(c) When did you do this?

\_\_\_\_\_  
*(Kailan mo ginawa ito?)*

4. What is your proof that you have a policy with the respondent?

\_\_\_\_\_  
*(Ano ang iyong katibayan o pruwera na meron kang policy na inisyu ng Hinahabla?)*

5. Did you attach your proof to this form?

*(Iyo bang inilakip ang katibayan o pruwera sa Form na ito?)*

Yes  
 *(Oo)*

No  
 *(Hindi)*

6. By the filing of this action, complainant hereby waives any amount in excess of ₱200,000.00, excluding interest and costs.

*(Sa pagsampa ng kasong ito, ang Naghahabla ay isinusuko ang anumang halaga na higit sa ₱200,000.00, hindi kasama ang tubo at gastos sa pagsampa ng kasong ito.)*

**P R A Y E R**  
**(PAGSAMO)**

WHEREFORE, complainant respectfully prays for judgment ordering respondent to pay the amount of ₱ \_\_\_\_\_, with interest at the rate of \_\_\_\_\_% per annum/per month from \_\_\_\_\_ until fully paid.

*(DAHIL DITO, ang Naghahabla ay magalang na sumasamo na igawad ang kapasiyahang utusan ang Hinahabla na magbayad sa Naghahabla ng halagang ₱ \_\_\_\_\_, pati ang tubo na \_\_\_\_\_% bawat taon/ buwan simula \_\_\_\_\_ hanggang ganap o lubos na mabayaran ito.)*

\_\_\_\_\_, \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
COMPLAINANT  
*(Naghahabla)*

**VERIFICATION AND CERTIFICATION AGAINST NON-FORUM SHOPPING,**

I, \_\_\_\_\_ of legal age, \_\_\_\_\_, (name)  
(citizenship)  
\_\_\_\_\_, and a resident of \_\_\_\_\_, (civil status)  
(residence)

on oath, state:

1. That I am the \_\_\_\_\_ in the above-entitled case have caused this \_\_\_\_\_ to be prepared; that I read and understood its contents which are true and correct of my own personal knowledge and/or based on true records;
2. That I have not commenced any action or proceeding involving the same issue or subject matter in the Supreme Court, the Court of Appeals or any other tribunal or agency ; that to the best of my knowledge, no such action or proceeding is pending in the Supreme Court, the Court of Appeals or any other tribunal or agency, and that, if I should learn thereafter that a similar action or proceeding has been filed or is pending before these courts or tribunal or agency, I undertake to report that fact to the Court within five (5) days therefrom.

IN WITNESS WHEREOF, I have hereunto set my hand this day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Affiant

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_  
Complainant

IC CAD CASE No.: \_\_\_\_\_

\_\_\_\_\_, Respondent.  
x- - - - - x

**SUMMONS**

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GREETINGS:**

You are hereby required, within ten (10) days from receipt of this Sum-mons, to file with the **INSURANCE COMMISSION** and serve on the complainant, your verified Response to the attached Statement of Claim. The form of the required Response is attached hereto or you may file a verified Response prepared by a lawyer provided that it complies with the requirements of the Rules of Procedure for Small Claims Cases in the Insurance Commission.

You are required to submit with your Response photocopies of the written denial of complainant's claim with the grounds for denial stated therein, the adjuster's report, if any, as well as affidavits of any witness to stand as your evidence in this case. You must present the original document/s on the day of hearing.

A motion to dismiss is prohibited and shall not be entertained. Any ground for dismissal should be included in your Response. Likewise, motions for bill of particulars and for extension to file pleadings, affidavits or any other paper are prohibited.

Your failure to respond within the 10-day period AND TO APPEAR AT THE HEARING OF THIS CASE will authorize this Commission to render judgment.

FOR:                    EMMANUEL F. DOOC  
                             Insurance Commissioner

\_\_\_\_\_  
Claims Adjudication Division

NOTE: FOR INQUIRIES, CALL TEL. # (02) 523-8461 to 70 loc. 104

**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_,  
Complainant

IC CAD CASE No.: \_\_\_\_\_

\_\_\_\_\_, Respondent.  
X-----X

**NOTICE OF HEARING**  
**(ABISO NG PAGDINIG)**

YOUR CASE IS SET for hearing before the Claims Adjudication Division of this Commission on  
\_\_\_\_\_ at \_\_\_\_\_.

(Ang inyong kaso ay diringgin ng Claims Adjudication Division ng Komisyon na ito sa  
\_\_\_\_\_, sa ganap na \_\_\_\_\_.)

YOU MUST ATTEND THE HEARING. IF YOU CANNOT ATTEND BECAUSE IT IS PHYSICALLY IMPOSSIBLE FOR YOU TO DO SO, YOU MAY AUTHORIZE A REPRESENTATIVE WHO IS NOT A LAWYER TO APPEAR FOR YOU. FOR THIS PURPOSE YOU SHOULD FILL UP FORM 7-IC (SPECIAL POWER OF ATTORNEY).

*(KINAKAILANGAN NINYONG DUMALO SA PAGDINIG. KUNG HINDI KAYA NG KATAWAN NINYONG ANG PAGDALO NANG PERSONAL SA PAGDINIG NG IYONG KASO, MAAARI KANG MAGPADALA NG IYONG KINATAWAN NA HINDI ABOGADO SA PAGDINIG. SA GANITONG LAYUNIN, PUNUAN NINYONG ANG FORM 5-SCC [NATATANGING GAWAD-KAPANGYARIHAN - SPECIAL POWER OF ATTORNEY.]*

HEARING OFFICER

NOTE: FOR INQUIRIES, CALL TEL. # (02) 523-8461 to 70 loc. 104



**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_  
Complainant

IC CAD CASE No.:  
\_\_\_\_\_

\_\_\_\_\_  
Respondent.

x-----x

**RESPONSE**  
**(SAGOT)**

Respondent/s state/s:

(Ang Hinahabla ay nagsasaad:)

1. Respondent denies the Statement of Claim for any of the following reasons: (Put a check in any of the following)

*(Tinatanggihan ng Hinahabla ang Habla ng Pagsingil sa alinmang sumusunod na dahilan): [Pumili sa mga sumusunod at lagyan ng tsek]*

(a) \_\_\_\_\_ Complainant's claim is denied because it is not valid.  
*(Ang claim ng Naghahabla ay tinatanggihan dahil hindi balido)*

\_\_\_\_\_ Complainant's claim is is partly valid.  
*(Ang claim ng Naghahabla ay bahagyang balido)*

- (b) If complainant's claim is denied, what are the grounds relied upon for the denial?

*(Kung ang claim ng Naghahabla ay itinatanggi, ano ang basehan sa pagtangga?)*

\_\_\_\_\_  
\_\_\_\_\_

(c) If complainant's claim is partly valid, how much is the compensable claim and what is the reason/s for the partial acceptance of the claim?

*(Kung ang claim ng Naghahabla ay bahagyang balido, magkano ang maibabayad na claim at ano ang dahilan para bahagya lamang tanggapin ang claim?)*

\_\_\_\_\_.

3. Do you have any proof?  Yes  No  
*(Meron ka bang anumang katibayan?) (Oo) (Hindi)*

What is this proof? \_\_\_\_\_ Adjuster's Report  
*(Anong katibayan ito?)*

\_\_\_\_\_ Other document  
*(Iba pang dokumento)*  
\_\_\_\_\_ Witness  
*(Saksi/testigo)*

4. As the Statement of Claim is baseless, defendant is entitled to the following counterclaims:  
*(Sa dahilang walang basehan ang Habla ng Pagsingil, ang Hinahabla ay may karapatan sa mga ganting-habol na sumusunod)*

\_\_\_\_\_ Attorney's fees in the amount of ₱ \_\_\_\_\_.  
*(Bayad para sa abogado)*

\_\_\_\_\_ Costs of suit in the amount of ₱ \_\_\_\_\_.  
*(Kabayaran/Gastos sa kasong isinampa)*

\_\_\_\_\_  
RESPONDENT  
(Hinahabla)

**REPUBLIC OF THE PHILIPPINES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_,  
Plaintiff,

vs.

Civil Case No. \_\_\_\_\_

For: \_\_\_\_\_

\_\_\_\_\_,  
Defendant.

x- - - - -x

**PLAINTIFF'S RETURN/MANIFESTATION**

This is to certify that on \_\_\_\_\_ (date) and \_\_\_\_\_ (date), the undersigned tried to serve the Summons, Statement of Claim, together with the Annexes and Notice of Hearing upon the defendant/s name/s of defendant/s \_\_\_\_\_, but failed and unavailing on the ground that the said defendant/s was/were not around during the time of service.

However, on \_\_\_\_\_ (date), the Summons, Statement of Claims, Annexes thereto and Notice of Hearing were served personally to (name of defendant who received), as shown by her/his signature appearing at the lower portion of the summons.

WHEREFORE, the original copy of the Summons is respectfully returned to the Honorable Court, DULY SERVED PERSONALLY.

\_\_\_\_\_, Philippines, (date).

\_\_\_\_\_  
PLAINTIFF

**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_,  
Complainant

IC CAD CASE No.:  
\_\_\_\_\_

\_\_\_\_\_,  
Respondent.

x- - - - - x

**MOTION TO PLEAD AS INDIGENT**

\_\_\_\_\_, unto this Honorable Commission,  
respectfully alleges that:

1. I am a resident of \_\_\_\_\_;
2. My gross income and that of my immediate family does not exceed \_\_\_\_\_;
3. I do not own real property with an assessed value of more than (amount as provided in the Revised Rules of Court, as amended) as shown by the attached Certification issued by the Office of the City/Municipal Assessor and the City/Municipal Treasurer's Office;
4. Due to financial constraint, I cannot afford to pay for the expenses of litigation as I do not have enough funds for food, shelter and other basic necessities;
5. Should the Commission render judgment in my favor, the amount of the docket and other legal fees which I was exempted from paying shall be a lien on the judgment, unless the Commission orders otherwise.

WHEREFORE, premises considered, it is respectfully prayed that I be exempted from the payment of docket and other legal fees as indigent pursuant to Section 7 of the Rules of Procedure for Small Claims Cases in the Insurance Commission.

Other reliefs just and equitable under the premises are likewise prayed for.

---

COMPLAINANT

**SPECIAL POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS:

I, \_\_\_\_\_, of legal age, single/ married, with residence at \_\_\_\_\_ do hereby appoint, name and constitute \_\_\_\_\_, likewise of legal age, single/married, with residence at \_\_\_\_\_, who is related to me and/or is my next-of-kin, and is not a lawyer, as my true and legal representative to act for and in my name and stead and to represent me during the hearing of IC CAD Case No. \_\_\_\_\_, to enter into amicable settlement, to submit to alternative modes of dispute resolution and to make admissions or stipulations of facts and documents without further consultation from me.

I hereby grant my representative full power and authority to execute and perform every act necessary to render effective the power to compromise as though I myself have so performed it and hereby approving all that he may do by virtue of these presents.

In witness whereof, I hereunto set my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_.

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Agent

Witnesses: \_\_\_\_\_

(ACKNOWLEDGMENT)

**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_  
Complainant

IC CAD CASE No.: \_\_\_\_\_

\_\_\_\_\_, Respondent.  
X-----X

**MOTION FOR APPROVAL OF COMPROMISE AGREEMENT**

The parties respectfully allege that:

1. Complainant filed this case against respondent because of the denial of his claim;
2. The parties have come to an amicable settlement and have executed a compromise agreement with the following terms and conditions, to wit:

(copy terms and condition here)

3. The parties agree that the approval of this agreement by the Commission shall put an end to this litigation, except for purposes of execution in case of default.

WHEREFORE, premises considered, the parties respectfully pray that the Commission approve this agreement and render judgment on the basis thereof.

\_\_\_\_\_, (place) , \_\_\_\_\_, (date) .

\_\_\_\_\_  
Complainant

\_\_\_\_\_  
Respondent

**REPUBLIC OF THE PHILIPPINES**  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue Manila

\_\_\_\_\_,  
Complainant

IC CAD CASE No.: \_\_\_\_\_

\_\_\_\_\_, Respondent.  
X-----X

**MOTION FOR EXECUTION**

Complainant/Respondent, unto this Honorable Commission, respectfully alleges that:

1. On \_\_\_\_\_, a judgment was rendered by the Commission, the dispositive portion of which reads:

2. The judgment is final, executory and unappealable.
3. The complainant/respondent has not complied with the judgment.

WHEREFORE, premises considered, it is respectfully prayed that a writ of execution be issued to implement the judgment of Commission dated

\_\_\_\_\_.  
\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Complainant/Respondent



Republic of the Philippines  
Department of Finance  
INSURANCE COMMISSION  
Insurance Commission Bldg.  
1071 U.N. Avenue corner Romualdez Sts.  
Manila

(NAME OF COMPLAINANT),

*Complainant,*

-versus-

IC (CAD) CASE NO. (\_\_\_\_\_)

(INSURANCE COMPANY),

*Respondents.*

**DECISION**

(DECISION)

**SO ORDERED.**

Manila, Philippines. (Date of Decision).

**EMMANUEL F. DOOC**  
Insurance Commissioner

Republic of the Philippines  
Department of Finance  
INSURANCE COMMISSION  
Insurance Commission Bldg.  
1071 U.N. Avenue corner Romualdez Sts.  
Manila

**(NAME OF COMPLAINANT),**  
*Complainant,*

-versus-

IC (CAD) CASE NO. (\_\_\_\_\_)

**(INSURANCE COMPANY),**  
*Respondents.*

X-----X

**NOTICE OF DECISION**

TO: **(NAME OF COMPLAINANT)**  
(Address)

**(NAME OF COMPLAINANT'S COUNSEL)**  
(Address)

**(NAME OF RESPONDENT)**  
**(Insurance Company)**  
(Address)

**(NAME OF RESPONDENT'S COUNSEL)**  
(Address)

GREETINGS:

You are hereby notified that on (Date of Decision), a **DECISION** copy attached, was rendered by this Commission in the above-entitled case, the original of which is on file with this Office.

Witness the HONORABLE EMMANUEL F. DOOC, Insurance Commissioner, this (Date of Notice of Decision).

**ATTY. RENE PAOLO G. MABOLO**  
IC Division Manager  
Claims Adjudication Division

Republic of the Philippines  
Department of Finance  
INSURANCE COMMISSION  
Insurance Commission Bldg.  
1071 U.N. Avenue corner Romualdez Sts.  
Manila

(NAME OF COMPLAINANT),  
*Complainant,*

-versus-

IC (CAD) CASE NO. (\_\_\_\_\_)

(INSURANCE COMPANY),  
*Respondents.*

X-----X

**WRIT OF EXECUTION**

To the Sheriff of Manila/ Any Deputize Officer of this Commission/ Duly Authorized  
Government Agent:

(WRIT OF EXECUTION)

GIVEN BY THE HONORABLE EMMANUEL F. DOOC, Insurance Commissioner,  
this (day) day of (month), (year).

(NAME)  
(IC Division Manager)  
Claims Adjudication Division