

FOUR WAYS TO SUBMIT A CLAIM

1

EMAIL

FirstNotice@icwgroup.com



2

FAX

858.436.8916



3

PHONE

1.877.4.ICW.NOW
1.877.442.9669



4

MAIL

First Notice of Loss
PO Box 509039
San Diego, CA 92150-9039



Claim Forms & Materials

www.icwgroup.com/pc

Questions?

1.877.442.9669, option 1