Surge Program Claims Checklist





Select Your Surge Protection Program:

□ SurgeShield [®]	□ Electronics Surge Protection SM (ESP)	☐ SurgeShield [®] Landlord	□ Commercial SurgeShield [®] with Warranty
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For SurgeShield Program Customers ONLY:

□ Before submitting your claim, visually inspect your SurgeShield device at the electric meter. If the device light is ON, it is an indication that the device is functioning properly. Please note that device lights are easier to see at night when there is no direct sunlight. For assistance locating the device light, please visit www.FPLHome.com/surgedevice. Please be aware that your home appliances may fail for a variety of reasons other than a failure of the surge protection device to properly perform, including normal wear and tear and power surges that can enter your home through other channels, such as cable and phone lines. Please understand that FPL Home may need to remove the SurgeShield device from your home for testing to verify whether the device has, in fact, failed to properly perform. If, after completing the above steps, you continue to believe that the SurgeShield surge protector device has failed to properly perform and that failure has resulted in damage to the appliances covered by the limited manufacturer's warranty, please complete the claim form and provide all requested documentation.

For Electronics Surge Protection program customers (or SurgeShield program customers who have confirmed their device light is OFF or who have decided to file a claim even though the device light is ON, indicating that the device is properly functioning), select one of the following options to start your claim:

Set up or log into our customer portal online*: FPLHome.com/portal *To create an account, reference your FPL account information, such as your account number, email, service address, and phone number.
OR
Print the claim forms from our website*: FPLHome.com
*First select "SUPPORT & CLAIMS," then "Submit a claim," and under "Links," select the claim forms to print.

Claim	Claim Submission Requirements:				
	Required Documents:	Required Information:			
	Claim Form (Page 1)	Customer and claim information must be filled out by the customer.			
	Claim Form (Page 2)	Service Provider Certification of Cause of Damage must be filled out by a licensed technician. You must hire a licensed technician to assess if the damage to your covered item was due to a power surge.			
	Repair Invoice or Estimate	The licensed technician must provide an itemized invoice or repair estimate on an official company document with a clear assessment, confirming the damage to the covered item was due to a power surge. The invoice or estimate should display the technician's company name, address, phone number, and license number.			
	Replacement Invoice or Estimate	If the technician determines that a surge damaged appliance or device is "not repairable," you must provide supporting documentation of the original cost, as well as a purchase estimate, receipt, or technician's repair estimate to validate the claimed replacement cost of the item does not exceed the original cost.			

Customer Support:				
For questions, concerns, or assistance with your claim, our dedicated Customer Service representatives are available to assist from Monday-Friday, 8:00 a.m5:00 p.m. ET:	833-437-5466			
To submit your claim documents via email:	SurgeClaims@FPL.com			
To submit your claim documents in the mail:	Surge Claims ES/SCS 4200 W. Flagler St, Miami, FL 33134			
To submit your claim documents via fax:	305-442-5018			



SurgeShield® Limited Manufacturer's Warranty Claim Form

			S	ection A: Customer Information	
Accountholder Name:		FPL Account Number:			
Service		Mailing			
Address:			lress:		
Incident/Loss Discovery Date:		Des	cribe the incident and w	eather conditions on the date:	
				nformation for Damaged Item(s	
Damaged Item(s):	Brand:		Model Number:	Serial Number:	
If you have filed a slatin with		/		of the listed its as a subsult of succession	
	your insurance ana/			of the listed items, enter below:	
Insurance/Warranty Co.:		Claim amount paid: \$			
Check one option: Are the indicato	r light(s) on the SurgeS	hield d	evice ON or OFF ? \square ON	□ OFF	
Note: Device lights are easier to se https://www.fplhome.com/SurgeDevice		is no d	direct sunlight. For assistand	ce locating the device light, please visi	
If the device light is ON, it is an indicate may submit a request to review your c		-		the device failed to perform properly, you ge to your covered appliance(s).	
including normal wear and tear and pomay need to remove the SurgeShield	ower surges that can ente device from your home fo protector device has faile	er your h or testin ed to pr	nome through other channels ng to verify whether the devic operly perform and that failu	rge protection device to properly perform, such as cable and phone lines. FPL Home te has in fact failed to properly perform. I re has resulted in damage to your covered	
Customer Email Address (Print)	:				
By providing my email address, I agree by FPL Home and its affiliates. I unders				nal materials about other products offered ne.	
Customer Signature (Required)				Date:	
failed to perform properly, and that fail Limited Warranty will reimburse you fo the item, or (3) the reasonable estimat You must provide, sign, and submit your cla	lure has resulted in dama r: (1) the fair market valu e to replace the item, whi im documentation to FPL Ho ered. Failure to comply with i	ige to your ie of the ichever in the withing the individual in the interval interval in the interval in the interval in the interval in the in	our eligible appliance(s). If you i item immediately before it fa is lower. Please review the cla in thirty (30) days from the date y e requirements may result in the c	Date: Date:	

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SurgeShield Residential Warranty Terms and Conditions and Manufacturer's Warranty available at www.FPLHome.com.



SurgeShield® Limited Manufacturer's Warranty Claim Form

		ertification of Cause of Dar d by a licensed repair technician	•	
l,	(name of provider),	am a licensed technician bea	aring contractor lice	nse number
My current employer is		_ (employer), bearing contractor		
license number	I inspected the residential appliances/systems located at			
	(property	y address) inspected on the _	(day) (of
(month) in	(year) consisting of:			
Brand of Damaged Item(s):	Model Number:	Serial Number:	Damaged by Power Surge?	Needs to be:
			☐ Yes	☐ Repaired
			□ No	☐ Replaced
			☐ Yes	☐ Repaired
			□ No	☐ Replaced
			☐ Yes	☐ Repaired
			□ No	Replaced
			☐ Yes	Repaired
			□ No	Replaced
			☐ Yes	Repaired
			□ No	Replaced
			☐ Yes	Repaired
			□ No	Replaced
			☐ Yes	Repaired
			□ No	Replaced
company's name, a caused by a power s	itemized invoice or estimand ddress, phone number, an urge, be sure to indicate the app	d license number. If you is on the invoice itself in ac	determine that the dition to the clair	he damage was m form.
my knowledge that electrical meter. I u as weather data or clarification in refere	the damages to such appli nderstand that if FPL Home surge protection device in ence to this claim. I may be I declare that I have read, u	ances/systems were cause has facts that contradict the spection/test data), FPL He called upon to further sub	ed by a power su he conclusions sta ome may contact ostantiate my con	rge through the ted above (such me for further clusions. Under

Technician Signature:

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the facts stated in it are true to the best of my knowledge and belief.