

Daniel R. Jenkins

INSURANCE CLAIM ASSISTANCE

“we work for you”

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either-or

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RESIDENTIAL REMODELING SPECIALIST

GENERAL CONTRACTOR

CA LIC 482984 SINCE 1985

NOT A PUBLIC INSURANCE ADJUSTER

INVESTIGATOR - EXPERT WITNESS – APPRAISER

WHAT IS INSURANCE FRAUD?

Insurance fraud refers to any duplicitous act preformed with the intent to obtain an improper payment from an insurer.

WHEN AN INSURANCE COMPANY DOES IT?

By definition it is not *Insurance Fraud*, but it can be criminal fraud or civil fraud. Criminal fraud requires the intent to commit a crime: malice, as evidenced by a criminal act; an intent to deprive or defraud the true owner of his property. Civil fraud applies more broadly to circumstances where bad-faith is usually involved, and where the penalties are meant to punish the perpetrator and put the victim back in the same position before the fraud took place. Note: when a loss occurs the insurer owes the claimant.

The essential elements needed to prove a fraud claim in general include: (1) a misrepresentation of a material fact; (2) by a person or entity who knows or believes it to be false; (3) to a person or entity who justifiably relies on the misrepresentation; and (4) actual injury or loss resulting from his or her reliance.

MY CASE

- (1) a) 34 photographs taken by the estimator, none support, 17 prove the estimate was intentionally underwritten, not replacement cost as required by law and by the policy;
 - b) side-by-side comparison of “combined estimate” shows it is a forgery, 69 line items do not match;
 - c) review of the Award shows its base is the “combined estimate”, therefore a forgery, and it is not an opinion when the Appraisers zeroed out the flooring materials; and
 - d) Award “Ownership Audit” shows a conspiracy to defraud.
- (2) AAA, the estimating contractor Tri-Tech Restoration Co., Inc. and the Appraisers all knew.
 - (3) the claimant has no choice, the insurance companies are in control, you get what they want to give, it does not matter what the law or their own policy says; and
 - (4) a total of 10 payments received over 42.5 months, still \$97,860.77 less than replacement cost.

After many years as a licensed General Contractor and a victim of AAA homeowners insurance I am convinced 100% of real property and personal property claims are intentionally underpaid yet not one fraud case has been brought against an insurance company in the US, not in California where the States Attorney General, the California Department of Insurance and the Contractors State License Board have my evidence nor even in New Jersey where an insurance company was caught changing engineers reports. The CDI in the person of James August said “I don’t have time” and the CSLB said “we don’t have jurisdiction over a contractor on an insurance job”.

The Ventura County District Attorney has the case, we will see. Laws are being broken while our “professional politicians” and our bureaucrats look the other way.