

New York Independent General Adjuster Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of questions,

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Don't worry about getting everything right, your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations, and take breaks to retain information better.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning.

7. Use Other Tools

Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly — adapt the tips above to fit your pace and learning style. You've got this!

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Questions

- 1. Which coverage is typically included in a Business Owners Policy that protects against liability claims?**
 - A. Property Damage Coverage**
 - B. General Liability Insurance**
 - C. Excess Liability Insurance**
 - D. Product Liability Insurance**
- 2. How can adjusters ensure fairness in the claims process?**
 - A. By prioritizing certain claimants**
 - B. By treating all parties equitably and adhering to ethical guidelines**
 - C. By making decisions based on company profit**
 - D. By minimizing claim payments**
- 3. Which of the following is NOT required of an insurer within 15 business days of receiving a claim?**
 - A. Notify the claimant of the settlement offer in writing**
 - B. Send a written acknowledgement to the claimant**
 - C. Begin investigating the loss**
 - D. Notify the claimant of all items, statements, and forms needed for the investigation**
- 4. Which aspect of insurance is primarily evaluated during risk assessment?**
 - A. The financial history of the insurer**
 - B. The activities and history of the insured**
 - C. The popularity of insurance policies on the market**
 - D. The regulatory environment of the insurance industry**
- 5. Lena is moving to Japan for two years and is leaving her plane in storage. What kind of aviation insurance should she purchase for her plane while it's in storage?**
 - A. All Risks - Not in Motion**
 - B. Admitted Aircraft Liability**
 - C. All Risks - Ground and Flight**
 - D. Hangarkeepers Liability**

- 6. What kind of damage is typically excluded from a Dwelling Policy?**
- A. Damage due to fire.**
 - B. Damage from earthquakes.**
 - C. Damage from water backup.**
 - D. Damage from windstorms.**
- 7. What is a primary goal of the claims adjusting process?**
- A. To maximize the insurance company's profits**
 - B. To ensure policyholders receive fair compensation**
 - C. To expedite the approval of claims**
 - D. To minimize administrative costs**
- 8. Under TRIA, what is the federal assistance cap for terrorism insurance annually?**
- A. \$100 billion**
 - B. \$200 billion**
 - C. \$100 million**
 - D. \$200 million**
- 9. Why is it important for adjusters to understand state regulations?**
- A. They set premium rates for insurance**
 - B. They dictate how claims must be handled and ensure compliance with legal standards**
 - C. They provide legal representation for adjusters**
 - D. They are subject to change every year**
- 10. How can historical claims data assist in the claims process?**
- A. It provides insights into patterns**
 - B. It guarantees claims approval**
 - C. It complicates the underwriting process**
 - D. It eliminates the need for documentation**

Answers

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1. B
2. B
3. A
4. B
5. A
6. B
7. B
8. A
9. B
10. A

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Explanations

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1. Which coverage is typically included in a Business Owners Policy that protects against liability claims?

- A. Property Damage Coverage**
- B. General Liability Insurance**
- C. Excess Liability Insurance**
- D. Product Liability Insurance**

The coverage that is typically included in a Business Owners Policy (BOP) and specifically protects against liability claims is General Liability Insurance. This type of insurance is designed to cover a business for claims of bodily injury, property damage, and personal injury that may arise from its operations, products, or services. It is a fundamental component of a BOP, providing essential protection for businesses against common risks. General Liability Insurance helps cover legal costs and settlements that may result if a third party is injured or their property is damaged due to the insured's business activities. This protection is crucial for business owners as it helps mitigate the financial impact of liability lawsuits, which can be significant. While Property Damage Coverage pertains to damage to the insured's own property, Excess Liability Insurance provides additional coverage beyond the limits of standard liability policies, and Product Liability Insurance specifically deals with claims arising from products sold by the business. Although these types of coverage can be important components of a complete risk management strategy, they are not typically bundled within a Business Owners Policy as the primary liability protection. Thus, General Liability Insurance stands out as a core feature of a BOP, aimed directly at addressing liability claims.

2. How can adjusters ensure fairness in the claims process?

- A. By prioritizing certain claimants**
- B. By treating all parties equitably and adhering to ethical guidelines**
- C. By making decisions based on company profit**
- D. By minimizing claim payments**

Adjusters can ensure fairness in the claims process by treating all parties equitably and adhering to ethical guidelines. This approach emphasizes the importance of impartiality and integrity in handling claims. An ethical guideline framework encourages adjusters to evaluate claims based on the facts, documentation, and established insurance policies, rather than personal biases or pressures. By maintaining a commitment to fairness and equity, adjusters can foster trust among claimants, insurers, and other stakeholders. This practice not only complies with legal and regulatory standards but also enhances the reputation of the insurance industry as a whole. Treating all parties fairly helps to uphold the principle that every claim deserves careful consideration and just treatment, which is essential for a balanced claims process. The other options compromise fairness, such as prioritizing certain claimants, which can lead to unjust advantages for some while disadvantaging others. Making decisions based solely on company profit undermines the adjuster's role as a neutral evaluator and can damage the claims process's integrity. Similarly, minimizing claim payments disregards the actual losses incurred and the entitlements of the claimants, which is contrary to the principle of fair compensation.

3. Which of the following is NOT required of an insurer within 15 business days of receiving a claim?

- A. Notify the claimant of the settlement offer in writing**
- B. Send a written acknowledgement to the claimant**
- C. Begin investigating the loss**
- D. Notify the claimant of all items, statements, and forms needed for the investigation**

The correct answer is the notification of the settlement offer in writing, as this is not required within the specified timeframe of 15 business days. Insurers are mandated to take certain actions shortly after receiving a claim to ensure a timely and efficient claims process. One of those mandates is to send a written acknowledgment to the claimant, which informs them that their claim has been received and is being processed. Additionally, insurers must begin the investigation of the loss, which enables them to gather necessary information and assess the details surrounding the claim. Furthermore, it is essential for the insurer to notify the claimant of any necessary items, statements, or forms needed to facilitate the investigation. These steps are crucial for maintaining communication with the claimant and ensuring that the claims process moves along without unnecessary delays. In contrast, notifying the claimant of the settlement offer is not part of the initial requirements imposed by the regulations. This aspect comes later in the claims handling process, after the investigation has concluded and the insurer has determined the outcome of the claim. Thus, while it is an important step in the overall claims process, it does not fall within the 15-day requirement following the claim's receipt.

4. Which aspect of insurance is primarily evaluated during risk assessment?

- A. The financial history of the insurer**
- B. The activities and history of the insured**
- C. The popularity of insurance policies on the market**
- D. The regulatory environment of the insurance industry**

The focus during a risk assessment in insurance is primarily on the activities and history of the insured. This evaluation involves a detailed analysis of the individual or entity seeking insurance coverage to understand their risk profile. Factors such as claims history, lifestyle, business operations, and any previous incidents or losses are scrutinized to determine the likelihood of a future claim. Insurers need to assess these aspects carefully to set appropriate coverage limits and premiums that reflect the risk involved. By understanding the insured's past behavior and potential risk factors, providers can make informed decisions on policy issuance and pricing, ensuring that they manage their own financial stability while meeting the needs of the insured. While other options may contribute to the overall insurance environment, they do not directly impact the specific risk assessment of an individual insured. For instance, the financial history of the insurer is more related to the company's capability to pay claims rather than the assessment of the insured's risk. Similarly, market popularity and the regulatory environment could influence the broader context of policy offerings but are not directly tied to evaluating the risk of the individual or entity applying for insurance coverage.

5. Lena is moving to Japan for two years and is leaving her plane in storage. What kind of aviation insurance should she purchase for her plane while it's in storage?

A. All Risks - Not in Motion

B. Admitted Aircraft Liability

C. All Risks - Ground and Flight

D. Hangarkeepers Liability

When considering the appropriate type of aviation insurance for a plane that will be in storage for an extended period, the option to choose is "All Risks - Not in Motion." This type of insurance specifically covers scenarios where the aircraft is not being operated, addressing potential risks associated with its condition while parked or stored. This coverage is beneficial for providing protection against various risks such as theft, vandalism, or damage from environmental factors while the aircraft remains stationary. Since Lena's plane will not be used during her two-year absence, this coverage is tailored to her situation, ensuring that her aircraft is safeguarded against incidents that could occur while it is in storage. Other types of insurance, like "Admitted Aircraft Liability," are more oriented towards liabilities arising during the operation of the aircraft and would not be relevant while it is in storage. "All Risks - Ground and Flight" is also inappropriate because it covers an active status when the plane is in operation, which does not apply here. "Hangarkeepers Liability" primarily provides coverage for damage that might occur to an aircraft in the care, custody, and control of a hangar operator, making it less applicable for an individual who is not actively using the aircraft and is instead storing it. Thus, for Lena

6. What kind of damage is typically excluded from a Dwelling Policy?

A. Damage due to fire.

B. Damage from earthquakes.

C. Damage from water backup.

D. Damage from windstorms.

Damage from earthquakes is typically excluded from a Dwelling Policy because most standard homeowners insurance policies do not cover earthquake damage. This exclusion exists due to the potential severity and high cost of earthquake-related destruction, making it necessary for homeowners to purchase separate earthquake insurance if they wish to be covered for those types of events. In contrast, damage due to fire, windstorms, and water backup can sometimes be covered under dwelling policies or may require additional riders or endorsements to provide that coverage. Fire damage, for instance, is generally a standard peril covered in most dwelling policies. Windstorm damage is also commonly covered, although specific conditions may apply, depending on the policy. Water backup can be covered through additional endorsements depending on the insurance provider and specific policy terms. Overall, the nature of earthquake damage exclusion underscores the need for specialized insurance products to address the unique risks associated with seismic activity.

7. What is a primary goal of the claims adjusting process?

- A. To maximize the insurance company's profits**
- B. To ensure policyholders receive fair compensation**
- C. To expedite the approval of claims**
- D. To minimize administrative costs**

The claims adjusting process is fundamentally rooted in the principle of providing fair compensation to policyholders who have experienced a loss. This process involves a thorough investigation of the claim to assess its validity, the damages incurred, and the appropriate compensation according to the terms of the insurance policy. By focusing on ensuring that policyholders receive fair compensation, the claims adjuster's role promotes trust and fairness within the insurance system. This facilitates a balanced approach, where policyholders feel that their losses are acknowledged and compensated fairly, which ultimately reinforces the purpose of insurance itself — to provide financial protection against unexpected events. While aspects such as expediting approval of claims, minimizing administrative costs, and the profitability of the insurance company are relevant to the overall operation of the insurer, these are secondary considerations compared to the primary objective of supporting policyholders in receiving the benefits they are entitled to under their policies. The core mission of claims adjusting is to align the insurer's performance with the needs and rights of the insured.

8. Under TRIA, what is the federal assistance cap for terrorism insurance annually?

- A. \$100 billion**
- B. \$200 billion**
- C. \$100 million**
- D. \$200 million**

The federal assistance cap under the Terrorism Risk Insurance Act (TRIA) is set at \$100 billion annually. This means that in the event of a certified act of terrorism, the federal government will provide backstop insurance coverage up to this amount. The purpose of this cap is to ensure that insurance companies can offer policies that cover terrorism risk without being overwhelmed by large payouts in the event of a significant attack. The cap is essential for guaranteeing that there is a limit to federal exposure while still encouraging the insurance market to develop and offer terrorism risk insurance. This balance helps stabilize the insurance industry and protects policyholders. Understanding the specific financial limits laid out in TRIA is critical for adjusters and insurance professionals, as they shape how claims are processed and how policies are structured regarding terrorism coverage.

9. Why is it important for adjusters to understand state regulations?

- A. They set premium rates for insurance**
- B. They dictate how claims must be handled and ensure compliance with legal standards**
- C. They provide legal representation for adjusters**
- D. They are subject to change every year**

Understanding state regulations is crucial for adjusters because these regulations dictate the procedures and practices that must be followed when handling insurance claims. This includes guidelines on how to investigate claims, the timeline for processing claims, requirements for maintaining documentation, and standards for communication with policyholders. By ensuring compliance with these legal standards, adjusters protect themselves, their employers, and the insurance companies from potential legal repercussions and penalties. Moreover, adhering to state regulations promotes fair treatment of policyholders, ensuring that claims are processed equitably and in accordance with the law. This compliance further instills confidence among consumers in the integrity of the insurance process and maintains the overall reputation of the insurance industry. Understanding and applying these regulations is not just a best practice but a necessity for operating within the legal framework of the insurance market.

10. How can historical claims data assist in the claims process?

- A. It provides insights into patterns**
- B. It guarantees claims approval**
- C. It complicates the underwriting process**
- D. It eliminates the need for documentation**

Historical claims data is incredibly valuable in the claims process as it offers insights into patterns and trends that can inform decision-making. By analyzing past claims, an adjuster can identify common circumstances under which claims are filed, recognize recurrent types of losses, and assess how different claims have been handled by insurance companies in similar situations. This allows for a more informed assessment of the current claim, as patterns may indicate the likelihood of certain outcomes or the typical cost associated with similar claims. Understanding these patterns equips claims professionals with the knowledge to process claims more efficiently and accurately. They can benchmark current claims against historical results, leading to improved predictability in claim outcomes. Additionally, this data can help insurers develop better risk models and pricing strategies, enhancing their overall operation. The other choices do not align with the role of historical claims data. While historical data cannot guarantee claims approval, complicate underwriting, or eliminate the need for documentation, it is an essential tool in streamlining the claims process and making informed decisions.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://newyorkindependentgeneraladjuster.examzify.com>

We wish you the very best on your exam journey. You've got this!