

## PROPERTY LOSS REPORT FORM

Insured: \_\_\_\_\_

Policy #: \_\_\_\_\_

### Loss Details

<b>Designated Contact (Name/Ph#/Email):</b>	
<b>Date of Loss and Time:</b>	
<b>Location of Loss:</b>	
<b>Kind of Loss (Fire/Water/Theft/Hail/Flood/Wind/Other):</b>	
<b>Probable Amount of Loss:</b>	
<b>If scheduled equipment, please identify with year, make, model, serial #</b>	
<b>Description of Loss &amp; Damage:</b>	