



Property Claim Report

Location Information:

Street Address: _____ Phone: _____
City: _____ Fax: _____
State: _____ Zip: _____ County: _____ Country: _____
Contact Person: _____ Email Address: _____

Incident Information:

Date of Incident: _____ Time of Incident: AM PM
Reported By: _____ Date Reported: _____
Accident Description: _____

Authorities Contacted? (i.e, Police) _____
Time civil authority closed area (if applicable) _____

Remarks & Comments:



Property Claim Report

Claim Reporting:

Note specific policy details below and how claim was reported with date, time and if applicable, who you spoke with:

Insurance Carrier: _____ Policy Number: _____

Reported by Phone: _____ Reported by Email: _____

Inventory of Damaged Items, If Available (Keep All Receipts and Take Photos):

Item Type	Make	Model No.	Serial No.	Estimated Cost