



PROPERTY LOSS NOTICE

SET TAB STOPS AT ARROWS
DATE (MM/DD/YY)

PRODUCER <input type="checkbox"/>		PRODUCER PHONE (A/C, NO., EXT.)		FOR COMPANY USE ONLY					
CODE SUB CODE		COMPANY		POLICY NUMBER		CAT. #			
		POLICY EFF. DATE (MM/DD/YY)		POLICY EXP. DATE (MM/DD/YY)		DATE (MM/DD/YY) & TIME OF LOSS		PREVIOUSLY REPORTED	
								A.M. YES P.M. NO	

INSURED

NAME AND ADDRESS		INSURED'S RESIDENCE PHONE (A/C, NO.)		INSURED'S BUSINESS PHONE (A/C, NO., EXT.)	
		PERSON TO CONTACT		WHERE TO CONTACT	
				WHEN	
		CONTACT'S RESIDENCE PHONE (A/C, NO.)		CONTACT'S BUSINESS PHONE (A/C, NO., EXT.)	

LOSS

LOCATION OF LOSS		POLICE OR FIRE DEPT. TO WHICH REPORTED	
KIND OF LOSS (FIRE, WIND, EXPLOSION, ETC.)		PROBABLE AMOUNT ENTIRE LOSS	
		\$	
DESCRIPTION OF LOSS & DAMAGE (USE REVERSE SIDE, IF NECESSARY)			

POLICY INFORMATION

MORTGAGEE, IF NONE SO INDICATE				
HOMEOWNER POLICIES SECTION I ONLY (COMPLETE FOR COVERAGES A, B, C, D & ADDITIONAL COVERAGES. FOR HOMEOWNERS SECTION II LIABILITY LOSSES, USE ACORD 3.				
COVERAGE A	COVERAGE B	COVERAGE C	COVERAGE D	DESCRIBE ADDITIONAL COVERAGES PROVIDED
DWELLING	APPURTENANT PRIVATE STRUCTURES	UNSCHEDULED PERSONAL PROPERTY	ADDITIONAL LIVING EXPENSES	\$ ON
\$	\$	\$	\$	\$ ON

SUBJECT TO FORMS. (INSERT FORM NOS. & EDITION DATES, SPECIAL DEDUCTIBLES)				DEDUCTIBLES
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FIRE, ALLIED LINES & MULTI-PERIL POLICIES (COMPLETE ONLY THOSE ITEMS INVOLVED IN LOSS)

ITEM	AMOUNT	BLDG.	CONTENTS	OTHER	% COINS	DEDUCTIBLE	COVERAGE AND / OR DESCRIPTION OF PROPERTY INSURED
	\$						
	\$						
	\$						

SUBJECT TO FORMS. (INSERT FORM NOS. & EDITION DATES, SPECIAL DEDUCTIBLES)							
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MISCELLANEOUS INFORMATION

OTHER INSURANCE (LIST COMPANIES, POLICY NUMBERS, COVERAGES & POLICY AMOUNTS)	

REMARKS	

ADJUSTER ASSIGNED		DATE ASSIGNED (MM/DD/YY)	
REPORTED BY		REPORTED TO	
		SIGNATURE OF PRODUCER OR INSURED	