



Loss Notice

Taken By: _____ Date: _____ Time: _____ EST#: _____

Notified By: Adjuster Homeowner Agent Claims Office Internet

Found Us Through: Adjuster Agent Friend Yellow Pages Program/Network Other: _____

Agent: _____ Phone Number: _____

Adjuster: _____ Assigned To: _____

Insurance Company: _____

Phone Number: _____ Fax Number: _____

Insure: _____ Cross Territory Required

Home Phone Number: _____ Business Phone Number: _____

Tenant – Loss Location: _____

Home Phone Number: _____ Business Phone Number: _____

Claim Number: _____ Date of Loss: _____ Deductible: _____

Description of Loss: _____

Liability Claim? Yes No Insured: _____

Emergency Repairs Needed? Yes No

Water Extraction Plumber Electrician Board-Up Tree Removal Other

Action Taken: _____

Remarks: _____

Map Reference: _____ County: _____

Directions: _____

Cross Street: _____

Customer Called By: _____ Date: _____ Time: _____

Response: _____

Associate Notified By Pager – Date: _____ Time: _____ By: _____

Inspection Date: _____ Time: _____

Associate: _____

Date Estimate Sent To Adjuster: _____ By: Fax Mail E-mail

Date Photos Sent To Adjuster: _____ By: Mail E-mail

Date Estimate Mailed To Owner: _____ Regular Copy Scope Copy