

PROPERTY LOSS SHORT FORM REPORT

Date:

PRELIMINARY REPORT

INTERIM REPORT

FINAL REPORT

TO:..... Insured:.....
Address:.....
Policy:..... Term.....
Agent.....
Address:.....
Date of Loss:.....
Claim #:..... Our File #.....

COVERAGE:..... SUGGESTED RESERVE:.....
\$.Item..... \$.
\$.Item..... \$.
\$.Item..... \$.
\$.Item..... \$.

LOCATION OF RISK..... MORTGAGE.....
SIZE & CONSTRUCTION OF BUILDING.....

PREVIOUS CLAIMS.....

DEDUCTIBLES.....

FORM NUMBERS..... CO. INS. () NO () YES

CAUSE OF LOSS:.....

DETAILS OF LOSS & REMARKS:.....

GOODS AND SERVICES TAX: The amount claimed should be net of recoverable GST.
Is the Insured registered for GST? YES.....NO.....
If the answer is YES, please state: a) Registration Number..... b) Percent Recoverable.....

REQUEST FOR PAYMENT: Please issue drafts as follows () We have issued drafts as follows ()
\$.To:.....
\$.To:.....
\$.To:.....
\$.To:.....

DENIED CLAIM () LESS THAN DED. () DENIED CLAIM FOR OTHER REASONS LISTED ABOVE: ().....

SUBROGATION: () NO () YES () SEE REMARKS SALVAGE: () NO () YES () SEE REMARKS.....

ENCLOSURERES:
INSURED'S REPORT REPAIR INVOICE/ESTIMATE OUR FINAL INVOICE
POLICE REPORT ADJUSTERS ESTIMATE INTRIM INVOICE
FIRE DEPT. REPORT SCHEDULE OF LOSS OTHER INVOICE
SKETCH/DIAGRAM PROOF OF LOSS
PHOTOGRAPHS SUBROGATION/LOAN RECEIPT
BUREAU & PROV. FORMS ATTENDED TO:

(Adjuster's Signature)