

# INSURANCE CLAIM REPORT

Policy Number:

Insured's Name:

Ask Client to hold and **go pull Insured's File.**

Address:

**Confirm address on file with Insured.**

Date of Loss:

Time of Loss:

Loss Location:

What Happened?

**Include in this section any damage caused by the loss and/or a general description of any items taken.**

Reported to Police?

Reported Where?

Case File Number:

**Any Loss involving a crime must be reported to the Police.**

Best phone number for contacting the Insured:

Best alternate phone number:

**Tell the Client that we will report the claim to their Insurance Company right away and the Company Adjuster will contact them, usually within one working day - depending on the urgency of the claim.**

Claim reported to Company by:

Tel/Fax/Email:

Company:

Person:

Completed By:

Date:

Time:

Agency: