

ACORD™ PROPERTY LOSS NOTICE

DATE (MM/DD/YYYY)

PRODUCER	PHONE (A/C, No, Ext): X	MISCELLANEOUS INFO (Site & location code)	DATE OF LOSS AND TIME		AM	PREVIOUSLY REPORTED	
					PM	YES	NO
		POLICY TYPE	COMPANY AND POLICY NUMBER		NAIC CODE		POLICY DATES
		PROP/HOME	CO:				EFF:
			POL:				EXP:
		FLOOD	CO:				EFF:
CODE:	SUB CODE:		POL:				EXP:
AGENCY CUSTOMER ID		WIND	CO:				EFF:
			POL:				EXP:

INSURED		CONTACT	
NAME AND ADDRESS OF INSURED		DATE OF BIRTH	CONTACT INSURED
		SOC SEC # OR FEIN:	
RESIDENCE PHONE (A/C, No)	BUSINESS PHONE (A/C, No, Ext)		
NAME AND ADDRESS OF SPOUSE (IF APPLICABLE)		DATE OF BIRTH	
		SOC SEC # OR FEIN:	
		RESIDENCE PHONE (A/C, No)	BUSINESS PHONE (A/C, No, Ext)
		WHERE TO CONTACT	WHEN TO CONTACT

LOSS			
LOCATION OF LOSS			POLICE OR FIRE DEPT TO WHICH REPORTED
KIND OF LOSS	<input type="checkbox"/> FIRE	<input type="checkbox"/> LIGHTNING	<input type="checkbox"/> FLOOD
	<input type="checkbox"/> THEFT	<input type="checkbox"/> HAIL	<input type="checkbox"/> WIND
			<input type="checkbox"/> OTHER (explain)
DESCRIPTION OF LOSS & DAMAGE (Use separate sheet, if necessary)			PROBABLE AMOUNT ENTIRE LOSS

POLICY INFORMATION					
MORTGAGEE					
<input type="checkbox"/> NO MORTGAGEE					
HOMEOWNER POLICIES SECTION 1 ONLY (Complete for coverages A, B, C, D & additional coverages. For Homeowners Section II Liability Losses, use ACORD 3.)					
A. DWELLING	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	DEDUCTIBLES	DESCRIBE ADDITIONAL COVERAGES PROVIDED
					ON
COVERAGES A, B, C, D EXCLUDES WIND					
SUBJECT TO FORMS (Insert form numbers and edition dates, special deductibles)					
FIRE, ALLIED LINES & MULTI-PERIL POLICIES (Complete only those items involved in loss)					
ITEM	SUBJECT OF INSURANCE	AMOUNT	% COINS	DEDUCTIBLE	COVERAGE AND/OR DESCRIPTION OF PROPERTY INSURED
	BLDG <input type="checkbox"/> CNTS				
	BLDG <input type="checkbox"/> CNTS				
	BLDG <input type="checkbox"/> CNTS				
SUBJECT TO FORMS (Insert form numbers and edition dates, special deductibles)					
FLOOD POLICY	BUILDING:	DEDUCTIBLE:	ZONE	PRE FIRM	DIFF IN ELEV
	CONTENTS:	DEDUCTIBLE:		POST FIRM	FORM TYPE
WIND POLICY	BUILDING	DEDUCTIBLE	CONTENTS	ZONE	GENERAL
				FORM TYPE	DWELLING
REMARKS/OTHER INSURANCE (List companies, policy numbers, coverages & policy amounts)/NY ONLY: PREVIOUS ADDRESS OF INSURED & WIFE'S MAIDEN NAME					
CAT #	FICO #	ADJUSTER ASSIGNED		ADJUSTER #	DATE ASSIGNED
REPORTED BY	REPORTED TO	SIGNATURE OF INSURED		SIGNATURE OF PRODUCER	

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