

ACORD™ PROPERTY LOSS NOTICE

DATE(MM/DD/YYYY)

PRODUCER PHONE (A/C, No, Ext):	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:			
CODE:	SUB CODE:	FLOOD	CO:			EFF:	
			POL:			EXP:	
AGENCY CUSTOMER ID		WIND	CO:			EFF:	
			POL:			EXP:	

INSURED

CONTACT

CONTACT INSURED

NAME AND ADDRESS OF INSURED		DATE OF BIRTH	NAME AND ADDRESS OF 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	RESIDENCE PHONE (A/C, No)	BUSINESS PHONE (A/C, No, Ext)
		SOC SEC # OR FEIN:	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"/> OTHER (explain)	PROBABLE AMOUNT ENTIRE LOSS		
	<input type="checkbox"/> THEFT	<input type="checkbox"/> HAIL	<input type="checkbox"/> WIND				
DESCRIPTION OF LOSS & DAMAGE (Use separate sheet, if necessary)							

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			
<input type="checkbox"/> COVERAGE A. 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			
	<input type="checkbox"/> BLDG <input type="checkbox"/> CNTS							
	<input type="checkbox"/> BLDG <input type="checkbox"/> CNTS							
	<input type="checkbox"/> 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	FORM TYPE	GENERAL	CONDO
	CONTENTS:	DEDUCTIBLE:		POST FIRM			DWELLING	
WIND POLICY	BUILDING	DEDUCTIBLE	CONTENTS	ZONE	FORM TYPE	GENERAL	CONDO	
						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			