

ACORD™ PROPERTY LOSS NOTICE

DATE

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:		
	CO:				EFF:		
CODE:	SUB CODE:		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 CONTACT		
		SOC SEC #:			
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 #:	WHERE TO CONTACT	WHEN TO CONTACT	

LOSS				POLICE OR FIRE DEPT TO WHICH REPORTED	
LOCATION OF LOSS					
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	
	CONTENTS:	DEDUCTIBLE:		POST FIRM	FORM TYPE	
				GENERAL	CONDO	
				DWELLING		
WIND POLICY	BUILDING	DEDUCTIBLE	CONTENTS	ZONE	FORM TYPE	
					GENERAL	
					DWELLING	
					CONDO	
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	