

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
CODE	SUB CODE	POLICY TYPE	COMPANY AND POLICY NUMBER	NAIC CODE	POLICY DATES	
		PROP/ HOME	CO		EFF	
AGENCY CUSTOMER ID		FLOOD	POL		EXP	
		WIND	CO		EFF	
					EXP	

INSURED		CONTACT		CONTACT INSURED	
NAME AND ADDRESS OF INSURED		DATE OF BIRTH	NAME AND ADDRESS OF INSURED		
		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
WIND POLICY	BUILDING	DEDUCTIBLE	ZONE	FORM TYPE	GENERAL DWELLING
	CONTENTS				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		

Applicable in Arizona

For your protection, Arizona law requires the following statement to appear on this form Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties

Applicable in Arkansas, Kentucky, Michigan, New Jersey and Pennsylvania

Any person who knowingly and with intent to defraud any insurance company or another person, files a statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact, material thereto, commits a fraudulent insurance act, which is a crime, subject to criminal prosecution and civil penalties

Applicable in California

Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties

Applicable in Colorado

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company Penalties may include imprisonment, fines, denial of insurance, and civil damages Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies

Applicable in Florida and Idaho

Any person who Knowingly and with the intent to injure, Defraud, or Deceive any Insurance Company Files a Statement of Claim Containing any False, Incomplete or Misleading information is Guilty of a Felony *

* In Florida - Third Degree Felony

Applicable in Indiana

A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony

Applicable in Minnesota

A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime

Applicable in Nevada

Pursuant to NRS 686A 291, any person who knowingly and willfully files a statement of claim that contains any false, incomplete or misleading information concerning a material fact is guilty of a felony

Applicable in New Hampshire

Any person who, with purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638 20

Applicable in New York

Any person who knowingly and with intent to defraud any insurance company or other person files a statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation

Applicable in Ohio

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud

Applicable in Oklahoma

WARNING Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony