

## **PROPERTY LOSS NOTICE**

MEMBER INFORMATION:		
Member Name And Mailing Address		
Contact Person For This Report		Contact Person's Phone Number(s) (include area code)
Contact reison For This Neport		Contact i erson's i none number(s) (include area code)
	Loss Inco	DRMATION:
Date Of Loss	Address of Damaged Proper	
(MM/DD/YYYY)		
	Address	City Zip Code
		ch a separate sheet with each address.)
Type of Property Damaged*		Occupancy*
(e.g., building, computer equipment, contractors' equipment, etc.)		(e.g. Administration Bldg., Storage, etc.)
contractors equipment, etc	•)	
*List all types of property separately or attach a separate sheet. You may also attach your property schedule with the damaged items		
circled.		
Cause of Loss		
(e.g., flood, wind, hail, fire, etc.)		
If Damage to Vehicle, list Year, Make, Model, and Vehicle Identification Number (VIN)		
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(Provide above information for each vehicle if multiple vehicles damaged or attach a separate sheet.)		
Description of Loss or Damage		
Any Additional Remarks, Comments, or Other Relevant Information		
This form completed by (Fire	st Name, Last Name)	Date Form Completed (MM/DD/YYYY)

Complete this form and return to <a href="mailto:OSCTexas@yorkrsg.com">OSCTexas@yorkrsg.com</a>