

KwikRisk[®] Loss Notice Hard-to-Place Residential & Commercial Insurance

	For Company Use Only	Company
, , , ,	Time & Date of Loss	
800.521.6800	Policy Number	
Date:	Policy Type	
	Effective	Expiration

General Information

Company Name		
Company Address		
Contact Person	Contact Phone Number	
Inspector Name	Inspector Phone Number	
Contact at Bank	Bank Contact Phone Numbe	?r
Loss Information		
Location of Loss	Police or Fire Department to	which Responded
Type of Loss	Amount of Entire Loss	Mortgage Balance
Description of Loss & Damage		

Policy Information (Fire & Allied Lines)

Item	Amount	Bldg	Con	Other	Coin %	Deductible	Coverage and/or Description of Property Insured

Forms (Insert form numbers, edition dates, special deductibles)

Miscellaneous Information (Other Insurance, Policy Numbers, Coverages, Limits)

Select One (if applicable)	Remarks
Foreclosure	
REO	

Loan Information

Loan Number	
Adjustor Assigned	Date Assigned
Reported By	Reported To

For your protection California law requires the following to appear on this form. Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Signature of Producer (Required)

Date

Please direct all questions to the attention of Lisa Ward at Iward@proctorlp.com /800.521.6800 x5565