



# CLAIM FORM

CONTOSO INSURANCE INC

123 Contoso Way

Springfield, WA 98123

(555) 555-1212

## Property Loss or Damage Claim form

Please write in black ink and use block capital letters and return the completed claim form together with any enclosures to Contoso Insurance Inc. to the address above.

### 1. Policy & Claim Information

Policyholder First Name Olivia	Policyholder Last Name Nguyen	Telephone Number 415-555-0321
Policy Number PH3456789	Coverage type Homeowners	Claim Number CLM7654321
Policy Effective Date 2020-11-10	Policy Expiration Date 2021-11-10	Damage Deductible \$2,000
Date of Damage / Loss 2023-07-22	Time of Loss 16:45	Date Prepared 2023-07-23
Property Address (Street, City, State, Zip code) 9101 Pine St, San Francisco, CA 94101		
Mailing Address (Street, City, State, Zip code) 9101 Pine St, San Francisco, CA 94101		

### 2. Property Claim details

Cause of Loss (i.e. natural disaster, fire, vandalism, etc.):

A tree fell on the house during a windstorm, causing damage to the roof and upper floor. Structural damage was noted in the attic and master bedroom.

Description of Property Loss or Damaged (**attach additional sheets if necessary**)

Item	Description	Date Acquired	Cost New/Replacement	Repair
Dyson V11 Vacuum Cleaner	Cordless vacuum with powerful suction and long battery life.	2019-05-30	\$600.00	\$150.00

Samsung Galaxy Tab S7+	High-end tablet with a large, vibrant display.	2020-12-18	\$850.00	\$250.00
Samsung FlexWash Washer	Innovative washer with dual washing capabilities.	2018-10-12	\$1,700.00	\$500.00
Samsung Galaxy Tab S7+	High-end tablet with a large, vibrant display.	2020-12-18	\$850.00	\$250.00

## CLAIMS DISCLAIMER

A \$1,000 deductible will apply to each insurable loss. Claims related to natural disasters—such as storms, floods, earthquakes, or other catastrophic events—will be processed based on the extent of verified damage and coverage terms outlined in the policy.

Losses without clear evidence of physical damage, structural impact, or verifiable cause may not be eligible for reimbursement. All claim adjustments are subject to verification against documented property values and assessment reports.

*Olivia Nguyen*

*2023-07-23*

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Policyholder signature

\_\_\_\_\_  
Date