

FIRST NOTICE OF LOSS (FNOL) LETTER

URGENT - IMMEDIATE ATTENTION REQUIRED

[Date]

SENT VIA:

- ☐ Certified Mail, Return Receipt Requested #: [Number]
- ☐ Email to: [Email Address]
- ☐ Fax to: [Fax Number]
- ☐ Online Portal Submission - Confirmation #: [Number]
- ☐ Phone Report - Confirmation #: [Number]

TO:

[Insurance Carrier Name]

Claims Department

[Address]

[City, State ZIP]

Phone: [24-Hour Claims Number]

Email: [Claims Email]

CC:

[Agent Name]

[Agency Name]

[Agent Email/Phone]

Re: FIRST NOTICE OF LOSS - IMMEDIATE CLAIM FILING

Policy Number: [Policy #]

Policy Period: [Start Date] to [End Date]

Named Insured: [Insured Name]

Additional Insureds: [Names]

Date of Loss: [Date of Loss]

Time of Loss: [Specific Time] [AM/PM] [Time Zone]

Loss Location: [Complete Address]

Type of Property: ☐ Primary Residence ☐ Secondary ☐ Rental ☐ Commercial

URGENT NOTICE

Dear Claims Department:

This letter serves as formal notice of a covered loss under the above-referenced insurance policy. I am hereby initiating a claim for substantial damages sustained on [Date of Loss] at the insured property.

Immediate attention is required to prevent further damage.

LOSS DETAILS

Date and Time of Loss: [Date] at approximately [Time] [AM/PM]

Type of Loss: ☐ Fire ☐ Lightning ☐ Windstorm ☐ Hail ☐ Water Damage

☐ Theft ☐ Vandalism ☐ Falling Objects ☐ Vehicle Impact

☐ Other: [Specify]

Cause of Loss:

[Detailed description of how the loss occurred, including sequence of events, discovery of damage, and any contributing factors]

Weather Conditions at Time of Loss:

Temperature: [Temp] | Wind: [Speed/Direction] | Precipitation: [Type/Amount]

[Reference any severe weather warnings/watches in effect]

DESCRIPTION OF DAMAGES

Structural Damage:

- **Roof:** [Damage description]
- **Exterior Walls:** [Damage description]
- **Windows/Doors:** [Damage description]
- **Foundation:** [Damage description]
- **Interior:** [Damage description]
- **Electrical System:** [Damage description]
- **Plumbing System:** [Damage description]
- **HVAC System:** [Damage description]

Personal Property Damage:

- **Furniture:** [General description and locations]
- **Electronics:** [General description]
- **Appliances:** [List major appliances]
- **Clothing/Personal Items:** [General scope]
- **Other Contents:** [Categories affected]

Additional Structures:

- **Garage:** [Damage if applicable]
- **Fence/Deck:** [Damage if applicable]
- **Storage Building:** [Damage if applicable]

Additional Living Expenses Required:

- **Temporary Housing Needed:** ☐ Yes ☐ No
- **Current Location if Displaced:** [Address/Hotel]
- **Number of Displaced Occupants:** [#]
- **Estimated Duration:** [Days/Weeks/Months]

IMMEDIATE ACTIONS TAKEN

To fulfill my duties to mitigate damages and protect the property, the following emergency measures were implemented:

1. **Safety/Security:**

- [Action taken] at [Time] on [Date]
- Cost: \$[Amount] - Receipt: ☐ Available

2. **Mitigation Efforts:**

- [Action taken] at [Time] on [Date]
- Contractor: [Name/Contact]
- Cost: \$[Amount] - Receipt: ☐ Available

3. **Temporary Repairs:**

- [Description] by [Contractor]
- Cost: \$[Amount] - Receipt: ☐ Available

4. **Documentation:**

- Photographs taken: [#] photos on [Date]
- Video documentation: [Length] on [Date]
- Inventory started: ☐ Yes ☐ In Progress

WITNESSES/PARTIES WITH KNOWLEDGE

Name	Relationship	Contact Info	What They Witnessed
[Name]	[Relationship]	[Phone/Email]	[What they saw/know]

Name	Relationship	Contact Info	What They Witnessed
[Name]	[Relationship]	[Phone/Email]	[What they saw/know]

AUTHORITIES NOTIFIED

- ☐ Police Department - Report #: [Number] - Officer: [Name/Badge]
- ☐ Fire Department - Report #: [Number] - Contact: [Name]
- ☐ Building Department - Contact: [Name]
- ☐ Utilities Notified - [Which ones]

ESTIMATED LOSS VALUE

Preliminary Assessment:

- Building/Structure: \$[Amount] to \$[Amount]
- Personal Property: \$[Amount] to \$[Amount]
- Additional Living Expenses: \$[Amount] per month
- Other Structures: \$[Amount]
- **Total Estimated Range: \$[Low] to \$[High]**

*This preliminary estimate is subject to adjustment pending professional evaluation and detailed inventory.
Full extent of damage may not yet be apparent.*

POTENTIAL SAFETY HAZARDS

- ☐ Structural instability
- ☐ Exposed electrical wiring
- ☐ Gas leak potential
- ☐ Mold growth risk
- ☐ Asbestos/Lead concerns
- ☐ Standing water
- ☐ Other: [Describe]

DOCUMENTATION AVAILABLE

The following documentation is immediately available:

- ☐ Photographic evidence ([#] digital photos)
- ☐ Video documentation ([Length] minutes)
- ☐ Emergency service receipts

- ☐ Initial contractor assessments
- ☐ Receipts for emergency repairs/mitigation
- ☐ Weather reports for date of loss
- ☐ Utility service interruption notices
- ☐ Prior inspection reports

IMMEDIATE NEEDS

I request the following immediate assistance:

1. **Advance Payment Authorization**

- Amount needed: \$[Amount]
- Purpose: [Emergency repairs/Living expenses/Mitigation]

2. **Emergency Services Authorization**

- ☐ Water extraction/drying
- ☐ Board-up/tarping
- ☐ Emergency electrical/plumbing
- ☐ Security services

3. **Temporary Housing Assistance**

- Required for [#] people
- Pet accommodations needed: ☐ Yes ([#] pets)
- Special needs: [Any ADA/medical requirements]

4. **Adjuster Inspection**

- Available for inspection: [Dates/Times]
- Preferred contact: [Phone/Email]
- Property access: [Instructions/Codes]

COVERAGE CONFIRMATION REQUEST

Please immediately confirm:

1. Receipt of this claim notice
2. Claim number assigned
3. Coverage confirmation for reported damages
4. Deductible amounts applicable

5. Policy limits for affected coverages
6. Name and contact for assigned adjuster
7. Expected timeline for initial inspection
8. Emergency payment procedures
9. Preferred vendors/contractors list
10. Any immediate documentation requirements

PRESERVATION OF RIGHTS

I reserve all rights under the policy including but not limited to:

- Full replacement cost value for all covered damages
- Additional living expenses for loss of use
- Code upgrade coverage
- Matching and uniformity provisions
- All endorsements and additional coverages
- The right to invoke appraisal if disagreements arise
- All remedies under state law and the policy

CONTACT INFORMATION

I am available for immediate contact and inspection:

Primary Contact:

Name: [Insured Name]

Phone (Mobile): [Number] - Available 24/7

Phone (Work): [Number] - Hours: [Hours]

Email: [Primary Email]

Best Contact Times: [Times/Days]

Alternate Contact:

Name: [Name]

Relationship: [Relationship]

Phone: [Number]

Email: [Email]

Property Access:

☐ Owner will be present

☐ Key available at: [Location]

☐ Lockbox code: [Code]

☐ Contact for access: [Name/Phone]

Current Temporary Address (if displaced):

[Address]

[City, State ZIP]

[Phone]

TIME SENSITIVE MATTERS

Time is of the essence in addressing this loss to:

- Prevent further damage from [weather/structural/other] exposure
- Secure the property from unauthorized entry
- Begin water/moisture mitigation within 24-48 hours
- Preserve evidence of damages
- Comply with policy conditions
- Minimize additional living expenses

COOPERATION STATEMENT

I am prepared to:

- Provide immediate access for inspection
- Submit to examination under oath if requested
- Provide all requested documentation promptly
- Complete detailed proof of loss forms
- Cooperate fully with the investigation
- Preserve all damaged property for inspection

REQUEST FOR ACKNOWLEDGMENT

Please acknowledge receipt of this notice within 24 hours and provide:

1. Assigned claim number
2. Adjuster name and direct contact information
3. Expected date/time for initial contact
4. Emergency authorization procedures
5. Any immediate requirements or forms needed

Thank you for your immediate attention to this matter. I look forward to your prompt response and to working cooperatively toward a fair and timely resolution of this claim.

Sincerely,

[Insured Name]

[Address]

[City, State ZIP]

[Phone Numbers]

[Email]

Date: [Date]

Time: [Time sent]

Enclosures:

- ☐ Initial photos ([#])
- ☐ Emergency receipts
- ☐ Contractor estimates
- ☐ Weather reports
- ☐ Other: [List]

IMPORTANT NOTICES:

This claim is filed under all available coverages including but not limited to dwelling, other structures, personal property, loss of use, and any applicable endorsements.

This notice is provided to comply with all policy requirements for prompt notification. Any delay in inspection or investigation may result in further damage for which the carrier may be liable.

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