

HOME INSURANCE CLAIM FORM

Springfield Mutual Insurance Company - Property Claims Division

CLAIM INFORMATION

Claim Number: CLM-2024-HOME-003
Date of Loss: 2025-10-30
Type of Loss: Fire Damage
Policy Number: HOME-827659

PROPERTY OWNER INFORMATION

Full Name: David Garcia
Property Address: 789 Pine St, Naperville, IL 60540
Phone: (555) 256-4505
Email: david.garcia@email.com

CAUSE OF LOSS

Electrical fire originated in garage outlet (overloaded circuit). Fire contained to garage but smoke damage throughout first floor.

DAMAGE DESCRIPTION

Garage structure charred (west wall), stored tools and equipment destroyed, vehicle in garage sustained heat damage. Smoke damage to kitchen and living room.

COST ESTIMATE

Estimated Repair Cost: \$35,000.00
Emergency Repairs Done: Yes - Emergency plumber called
Photos Attached: Yes - 12 photos
Contractor Estimate: Attached

Property Owner Signature: _____ **Date:** 2026-02-21