

# HOME INSURANCE CLAIM FORM

Springfield Mutual Insurance Company - Property Claims Division

---

## **CLAIM INFORMATION**

---

**Claim Number:** CLM-2024-HOME-011  
**Date of Loss:** 2025-11-24  
**Type of Loss:** Water Damage  
**Policy Number:** HOME-584125

## **PROPERTY OWNER INFORMATION**

---

**Full Name:** William White  
**Property Address:** 654 Cedar Ln, Aurora, IL 60505  
**Phone:** (555) 286-1823  
**Email:** william.white@email.com

## **CAUSE OF LOSS**

---

Water heater tank failure (10-year-old unit). Bottom rusted through, 50 gallons released into utility room.

## **DAMAGE DESCRIPTION**

---

Utility room flooring destroyed, adjacent family room carpet saturated, lower drywall damage in both rooms, furnace base corroded.

## **COST ESTIMATE**

---

**Estimated Repair Cost:** \$7,800.00  
**Emergency Repairs Done:** Yes - Temporary tarp installed  
**Photos Attached:** Yes - 12 photos  
**Contractor Estimate:** Attached

**Property Owner Signature:** \_\_\_\_\_ **Date:** 2026-02-21