

# HOME INSURANCE CLAIM FORM

Springfield Mutual Insurance Company - Property Claims Division

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## **CLAIM INFORMATION**

**Claim Number:** CLM-2024-HOME-005  
**Date of Loss:** 2026-01-15  
**Type of Loss:** Water Damage  
**Policy Number:** HOME-508396

## **PROPERTY OWNER INFORMATION**

**Full Name:** Robert Wilson  
**Property Address:** 654 Cedar Ln, Aurora, IL 60505  
**Phone:** (555) 888-1320  
**Email:** robert.wilson@email.com

## **CAUSE OF LOSS**

Basement flooding from sump pump failure during heavy rainfall. Pump motor burned out, backup battery also dead.

## **DAMAGE DESCRIPTION**

Finished basement carpet ruined (800 sq ft), drywall damaged 4 feet up all walls, HVAC ductwork contaminated, stored belongings destroyed.

## **COST ESTIMATE**

**Estimated Repair Cost:** \$18,500.00  
**Emergency Repairs Done:** No emergency repairs needed  
**Photos Attached:** Yes - 12 photos  
**Contractor Estimate:** Attached

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