

HOME INSURANCE CLAIM FORM

Claim Number: CLM-2024-HOME-006

Date of Loss: 2025-11-28

Claimant Name: Lisa Anderson

Policy Number: HOME-698001

Property Address: 321 Maple Dr, Peoria, IL

Type of Loss: Water Damage

Cause: Basement flooding

Damage Description: Basement carpet, drywall, HVAC damaged

Estimated Repair Cost: \$13,176.00

Emergency Services: Yes - Fire Dept called on 2025-11-28

Photos Attached: Yes

Signature: [Signed]

Date: 2025-11-28