

PREMIER INSURANCE GROUP

Excellence in Coverage • Trusted Since 1985



TXN00000002

24/7 Helpline: 1-800-555-CLAIM | claims@premierinsurance.com

PROPERTY INSURANCE CLAIM

Claim Date: May 13, 2020

■ TRANSACTION INFORMATION

| Transaction ID | Transaction Date | Agent ID |
|----------------|---------------------------|------------|
| TXN00000002 | June 01, 2020 at 12:00 AM | AGENT00769 |

| Vendor ID | Policy Effective Date |
|-----------|-----------------------|
| VNDR00592 | April 21, 2018 |

■ POLICYHOLDER COMPLETE INFORMATION

| Policy Number | Customer ID | Insurance Type |
|---------------|-------------|----------------|
| PLC00009594 | A00008149 | Property |

Customer Name

Ricardo Gatlin

| Address Line 1 | Address Line 2 |
|----------------------|----------------|
| 8595 West 81st Drive | N/A |

| City | State | Postal Code |
|--------|-------|-------------|
| Arvada | CO | 80005 |

| SSN (Masked) | Age | Marital | Tenure | Education |
|--------------|-----|---------|-----------|-----------|
| XXX-XX-3536 | 61 | No | 80 months | Bachelor |

| Employed | Family Members | House Type | Social Class |
|----------|----------------|------------|--------------|
| Yes | 4 | Rent | MI |

■ COMPLETE INCIDENT DETAILS

| Loss Date | Report Date | Hour of Day |
|--------------|--------------|-------------|
| May 13, 2020 | May 18, 2020 | 0:00 |

| Incident City | Incident State | Severity |
|---------------|----------------|------------|
| Montgomery | AL | Total Loss |

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| Authority Contacted | Any Injury | Police Report |
|---------------------|------------|---------------|
| Ambulance | Yes | No |

■ FINANCIAL & RISK INFORMATION

| Premium Amount | Claim Amount | Claim Status |
|----------------|--------------|--------------|
| \$141.71 | \$26,000.00 | A |

| Routing Number | Account (Masked) | Risk Segment |
|----------------|------------------|--------------|
| 40125819 | *****3731 | L |

Financial Summary:

- Total Claim Amount: \$26,000.00
- Monthly Premium: \$141.71
- Risk Category: L
- Status: A

■ PROPERTY INSURANCE CLAIM DETAILS

| Property Type | Damage Type |
|---------------|-------------|
| Commercial | Flood |

Property Address

8595 West 81st Drive, Arvada, CO

| Estimated Repair Cost | Claim Amount |
|-----------------------|--------------|
| \$24,641.99 | \$26,000.00 |

Required Documents for Property Insurance Claim:

- Property Ownership Documents
- Photos of Damage (Multiple angles)
- Repair Estimates from contractors
- Police Report (for theft/vandalism)
- Fire Department Report (for fire damage)
- Original Purchase Receipts
- Previous Inspection Reports
- Inventory of damaged items

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■ DECLARATION & AUTHORIZATION

DECLARATION:

I hereby declare that all the information provided in this claim form is true, complete, and accurate to the best of my knowledge and belief. I have not withheld any material information that may influence the assessment or settlement of this claim.

AUTHORIZATION:

I authorize Premier Insurance Group and its representatives to investigate this claim, including obtaining information from medical providers, employers, government agencies, and any other relevant parties. I understand that any false statement or misrepresentation may result in denial of the claim and may subject me to legal action.

ACKNOWLEDGMENT:

I acknowledge that the settlement of this claim is subject to the terms, conditions, and exclusions of my insurance policy.

Policyholder Signature

Date

Witness Signature

Date