

# ACORD™ PROPERTY LOSS NOTICE

DATE (MM/DD/YYYY)

PRODUCER <b>ATLANTIC RISK MANAGEMENT</b> 5850 Waterloo Road, Suite 240 Columbia, MD 21045	MISCELLANEOUS INFO (Site & location code)	DATE OF LOSS AND TIME	AM PM	PREVIOUSLY REPORTED YES NO
CODE:                      SUB CODE:	POLICY TYPE COMPANY AND POLICY NUMBER NAIC CODE POLICY DATES			
AGENCY CUSTOMER ID	PROP/ HOME CO: POL: FLOOD CO: POL: WIND CO: POL:	EFF: EXP: EFF: EXP: EFF: EXP:		

<b>INSURED</b>		<b>CONTACT</b>	
NAME AND ADDRESS OF INSURED		CONTACT INSURED	
DATE OF BIRTH		NAME AND ADDRESS OF INSURED	
SOC SEC # OR FEIN:			
RESIDENCE PHONE (A/C, No)	BUSINESS PHONE (A/C, No, Ext)		
NAME AND ADDRESS OF SPOUSE (IF APPLICABLE)		DATE OF BIRTH	RESIDENCE PHONE (A/C, No)
		SOC SEC # OR FEIN:	BUSINESS PHONE (A/C, No, Ext)
		WHERE TO CONTACT	WHEN TO CONTACT

**LOSS**

LOCATION OF LOSS				POLICE OR FIRE DEPT TO WHICH REPORTED	
KIND OF LOSS	<input type="checkbox"/> FIRE	<input type="checkbox"/> LIGHTNING	<input type="checkbox"/> FLOOD	<input type="checkbox"/> OTHER (explain)	PROBABLE AMOUNT ENTIRE LOSS
	<input type="checkbox"/> THEFT	<input type="checkbox"/> HAIL	<input type="checkbox"/> WIND		
DESCRIPTION OF LOSS & DAMAGE (Use separate sheet, if necessary)					

**POLICY INFORMATION**

NO MORTGAGEE

HOMEOWNER POLICIES SECTION 1 ONLY (Complete for coverages A, B, C, D & additional coverages. For Homeowners Section II Liability Losses, use ACORD 3.)

A. DWELLING	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	DEDUCTIBLES	DESCRIBE ADDITIONAL COVERAGES PROVIDED
					ON

COVERAGE A. EXCLUDES WIND

SUBJECT TO FORMS (Insert form numbers and edition dates, special deductibles)

FIRE, ALLIED LINES & MULTI-PERIL POLICIES (Complete only those items involved in loss)

ITEM	SUBJECT OF INSURANCE	AMOUNT	% COINS	DEDUCTIBLE	COVERAGE AND/OR DESCRIPTION OF PROPERTY INSURED
	BLDG <input type="checkbox"/> CNTS				
	BLDG <input type="checkbox"/> CNTS				
	BLDG <input type="checkbox"/> CNTS				

SUBJECT TO FORMS (Insert form numbers and edition dates, special deductibles)

FLOOD POLICY	BUILDING:	DEDUCTIBLE:	ZONE	PRE FIRM	DIFF IN ELEV	FORM TYPE	GENERAL DWELLING	CONDO
	CONTENTS:	DEDUCTIBLE:		POST FIRM				
WIND POLICY	BUILDING	DEDUCTIBLE	CONTENTS	ZONE	FORM TYPE	GENERAL DWELLING	CONDO	

REMARKS/OTHER INSURANCE (List companies, policy numbers, coverages & policy amounts)/NY ONLY: PREVIOUS ADDRESS OF INSURED & WIFE'S MAIDEN NAME

CAT #	FICO #	ADJUSTER ASSIGNED	ADJUSTER #	DATE ASSIGNED
REPORTED BY	REPORTED TO	SIGNATURE OF INSURED	SIGNATURE OF PRODUCER	