A DIVISION OF INNOVATION GROWTH PARTNERS SPECIALTY, LLC

Property Loss Form

14241 Dallas Parkway, Suite 850 | Dallas, Texas 75254

* Required information

COMPANY INFORMATION	
Company:	* Policy number:
* Policy effective date:	* Policy expiration date:
INSURED INFORMATION	
* Name:	
* Address:	
* Person to contact:	
·	* Contact cell/business phone:
* Borrower's name:	Loan number:
LOSS INFORMATION	
*Type of loss: Fire Flood Water damage	Theft Wind Hail Lightning Other:
* Date of loss:	
*Location of loss (address):	
* Police/fire dept. to which reported:	
•	*Probable dollar amount of loss: \$
* Date of last inspection report (prior to loss):	* Date of last photos (prior to loss):
Attach last two inspection reports and last set of photos that show area of damage being reported. These should be prior to any damage. Theft or vandalism claims will not be paid without inspection reports and current photos attached.	
POLICY INFORMATION	
POLICI INI ORMATION	
Type of property: Commercial Residential Vac	cant Occupied Other:
* Mortgagee:	
Dwelling coverage (amount of insurance): \$	Deductible: \$
► Attach additional page to include more remarks or de	tails of loss.
ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION, IS GUILTY OF A FELONY OF INSURANCE FRAUD.	
Reported by:	Reported to:
Signature	Date
Please email this completed form to customerservice@lloyd-ins.com .	

