



DATE REPORTED: _____

LOSS REPORT for _____

☐ PROPERTY ☐ EQUIPMENT BREAKDOWN ☐ TERRORISM

NAME of LOCATION: _____

LOCATION CODE (if applicable): _____ BUILDING NAME: _____

ADDRESS WHERE INCIDENT OCCURRED: _____ CITY and STATE: _____

CONTACT PERSON (at location): _____ PHONE: () _____

EMAIL: _____

DATE/TIME of INCIDENT: _____

POLICE CONTACTED? ☐ YES ☐ NO REPORT # _____

TYPE of LOSS: ☐ FIRE ☐ THEFT ☐ LIGHTNING ☐ HAIL ☐ FLOOD ☐ WIND ☐ OTHER _____

(OTHER PARTY INVOLVED)

NAME: _____ EMAIL: _____

ADDRESS: _____ CITY and STATE: _____

HOME PHONE: () _____ WORK PHONE: () _____

DESCRIBE INJURY or DAMAGE: _____

BRIEF DESCRIPTION of INCIDENT INVOLVING PROPERTY DAMAGE and CAUSE of LOSS (ATTACH PHOTOS WITH REPORT, USE AN ATTACHMENT IF NEEDED): _____

ACTION TAKEN TO PROTECT DAMAGED PROPERTY (USE AN ATTACHMENT OF NEEDED): _____

PROBABLE AMOUNT LOSS: \$ _____

WITNESS: _____ EMAIL: _____

ADDRESS: _____

HOME PHONE: () _____ WORK PHONE: () _____

REPORTED BY: _____ DEPARTMENT/TITLE: _____

PLEASE SEND COMPLETED NOTICE TO

EMAIL: Jacqueline.Baynard@sorm.state.tx.us, SCclaims@ajg.com,
Trey.Johnson@yorkrsg.com and Cheryl.Kelley@ajg.com

Phone: 817-988-5088 Trey Johnson / 512-936-1555 Jackie Baynard

Arthur J. Gallagher Risk Management Services, Inc. 5420 LBJ Freeway, Suite 400 Dallas, TX 75240

CLAIMS: (800) 777-9418 FAX (972) 991-4061

Please note: Filling out this form is a formal and necessary step in the claims process. No other notice (phone calls, email, etc.) is considered valid notification.