

Short Form Loss Report Template

1. Policy Information

Policy Number

Insured Name

Contact Number

Email Address

2. Loss Details

Date of Loss

Time of Loss

Location of Loss

Cause of Loss

Description of Incident

3. Property / Item(s) Involved

Property/Item Description

Estimated Amount of Loss

4. Additional Information

Police/Authority Notified? (If applicable)

Report Number

Other Relevant Information

5. Declaration

Name

Date

Signature (if submitting digitally, type full name)

Important Notes

- This form is for preliminary notification of loss only.
- Submit completed report as soon as possible after the incident.
- Attach supporting documents (photos, receipts, police reports) where relevant.
- Providing accurate and complete information can avoid delays in claim processing.