

**PROPERTY LOSS NOTICE**

**MEMBER INFORMATION:**

<b>Member Name And Mailing Address</b>	
<b>Contact Person For This Report</b>	<b>Contact Person's Phone Number(s) (include area code)</b>

**LOSS INFORMATION:**

<b>Date Of Loss (MM/DD/YYYY)</b>	<b>Address of Damaged Property</b>	
	Address	City Zip Code
	(List addresses separately or attach a separate sheet with each address.)	
<b>Type of Property Damaged* (e.g., building, computer equipment, contractors' equipment, etc.)</b>	<b>Occupancy* (e.g. Administration Bldg., Storage, etc.)</b>	

\*List all types of property separately or attach a separate sheet. You may also attach your property schedule with the damaged items circled.

**Cause of Loss (e.g., flood, wind, hail, fire, etc.)**

**If Damage to Vehicle, list Year, Make, Model, and Vehicle Identification Number (VIN)**

(Provide above information for each vehicle if multiple vehicles damaged or attach a separate sheet.)

**Description of Loss or Damage**

**Any Additional Remarks, Comments, or Other Relevant Information**

<b>This form completed by (First Name, Last Name)</b>	<b>Date Form Completed (MM/DD/YYYY)</b>
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Complete this form and return to [OSCTexas@yorkrsg.com](mailto:OSCTexas@yorkrsg.com)

TCRMF Toll Free Phone number 800-580-6467

Fax 614-956-2636