

Lender Placed Insurance Claim Form

Lender FI Code Policy Number Date

Lender Name

Lender Address City State Zip

Location of Loss Address City State Zip

Name of Mortgagor Loan Number Fannie / Freddie
 Other

Type of Risk: Dwelling Multi Dwelling Commercial Mobile Home

Condition of Risk: Occupied Vacant

LOSS INFORMATION

Date of Loss Actual Discovered

Cause of Loss (Fire, Vandalism, Theft, Wind, Flood, etc.)

Brief Description & Extent of Damage

Reported By: Mortgagor Other, please name

Date Reported: Lender Contact:

Telephone & Ext.: Email:

Loss Submitted by:

INSURMARK USE ONLY (Lender does not complete)

Property Amount Insured: \$ Carrier:

Contents Coverage Yes No Deductible:

Liability Coverage Yes No Policy Number / Contract Year:

Entry Date: Policy Term: to

Entry Date of Contents/Liability (if different):

Initials: