

# REPORT OF PROPERTY DAMAGE

\* = Required Field

MEMBER NAME Diocese of Davenport - Certificate9165

\* PARISH/SCHOOL \_\_\_\_\_

\* ADDRESS \_\_\_\_\_

\* CITY \_\_\_\_\_ \* ZIP \_\_\_\_\_

\* PHONE NUMBER \_\_\_\_\_ PARISH EMAIL \_\_\_\_\_

\* PERSON REPORTING \_\_\_\_\_

DATE FORM COMPLETED (MM/DD/YYYY) \_\_\_\_\_

\* DATE OF INCIDENT (MM/DD/YYYY) \_\_\_\_\_

LOCATION OF DAMAGE \_\_\_\_\_

WERE PHOTOGRAPHS TAKEN? \_\_\_\_\_

(Please take photos for damage in excess of \$5,000)

DESCRIBE INCIDENT

GIVE POLICE REPORT NUMBER \_\_\_\_\_

(If vandalism or theft, police must be notified.)

DESCRIBE BUILDING AND/OR CONTENTS DAMAGE



## ***SPECIAL INSTRUCTIONS***

- ***MEMBERS SHOULD PROCEED WITH ANY EMERGENCY REPAIRS NEEDED TO PREVENT FURTHER DAMAGE.***
- ***TWO ESTIMATES ARE REQUIRED FOR ALL NON-EMERGENCY REPAIRS, UNLESS PRIOR APPROVAL IS OBTAINED FROM CATHOLIC MUTUAL.***
- ***SEND COMPLETED FORM TO REPORTACLAIM@CATHOLICMUTUAL.ORG OR FAX TO 402-551-2943.***