

Risk Management Potential Property Claim Form

To. Risk Management, Phone (859) 257-3708
332 Peterson Service Building, Fax (859) 257-1050
Lexington, Kentucky 40506-0005 Email: twadki2@email.uky.edu

FROM: _____ DATE: _____

SUBJECT: Potential Property Claim, Police Report No. _____

Please indicate below the type of policy associated with your loss. Deductibles indicated are per occurrence.

- _____ **Crime Policy** - \$100,000 deductible. Includes cash and damages or theft of property during the theft of cash.
- _____ **Computers** - \$1,000 deductible for all perils.
- _____ **Inland Marine** - \$1,000 deductible. Items are scheduled for coverage by department.
- _____ **Property/Other** - \$1,000 deductible/Telephone -\$1,000 deductible. Values by Building Inventory Locations.

In order to process the above potential claim, the following information is needed. Please indicate if attached.

- _____ Purchase Document(s) of equipment stolen, damaged, etc., or Inventory Records
- _____ Repair Estimates/Invoices
- _____ Purchase Documents of replacement equipment or written quote for replacement cost
- _____ Other/Comments: _____

Location of Incident

Building No.: _____ Building Name: _____

Department No.: _____ Dept. Name: _____

Person Reporting Loss: _____ Contact Person: _____

Amount of Loss: _____ Job Order No. _____

Cause: _____ (water, fire, wind, lightening, vandalism, theft, etc.)

Description of Loss _____

We need complete itemized description of materials and labor. If you have any questions, please call us at 257-3708.