

# CLAIM FOR PROPERTY DAMAGE

**NOTICE TO CLAIMANT:** So that your property damage claim may receive proper consideration, please complete ALL portions of this form with as much information and detail as possible. ALL material facts should be stated, as this will be the basis of further action upon your claim.

Please use ink for or type in your responses.

<b>1. Full Name of Claimant (REGISTERED OWNER(S):</b>		<b>2. Age:</b>	<b>3. Employer &amp; Occupation/Title/Rank:</b>
<b>4. Street Address:</b>	<b>5. Mailing Address (If different from street address):</b>		<b>6. Phone Numbers:</b> (H): (C): (W): Email:
<b>7. Date and Time of Incident:</b>			<b>8. Exact Location of Incident:</b>
<b>9. Description of Incident</b> Please provide, IN YOUR OWN WORDS, as much detail as possible. If necessary, use the opposite side to draw a diagram &/or for extra space. Indicate your vehicle as auto #1 and the other as auto #2, etc. If you were not the driver, please enter your statement along with the driver's name, age, address & contact #'s, as an in-person interview with &/or statement from the driver may be required.):			
<b>10. Witness(es)</b> [Name(s), Phone(s) & Address(es) - statement(s) may be requested from the witness(es). State where they were located, or if they were in your car, state where they were each sitting, when the incident occurred.]:			
<b>11. Description of Claimant's Property</b> (make, model & year of car, color, license plate #, VIN #):			
<b>12. Basis of Claim</b> - I contend that I am entitled to recover damages from the person(s) named in item #9 for the following reason(s):			
<b>13.</b> "I would like a cash offer settlement versus repair, so I hereby offer to accept as <b>full satisfaction and final settlement</b> of my claim the amount of \$ _____. To support my claim, I submit the following required items (i.e. enter "police report", "witness(es)' statements", "estimate(s) for repair", "license", "registration", etc.):			

**14. Declaration** - I certify that all of the statements set forth on this form are true to the best of my recollection and knowledge and that all relevant and material facts have been set forth here. **I further declare that I suffered no bodily injury of any kind, unless I have indicated that in writing to Beneficial Adjusting, and that, to my knowledge, no one else in my vehicle suffered injury.**

Initial: \_\_\_\_\_ Date: \_\_\_\_\_

Executed this \_\_\_\_\_ day of the (enter month here) \_\_\_\_\_, \_\_\_\_\_

at (where this form was completed) \_\_\_\_\_

**Claimant (Print your full name, sign and date above)**

**NOTE:** Please refer ALL questions regarding your claim to the Beneficial Adjusting Company and note that official processing of your claim cannot begin until ALL required documents have been submitted and photos have been taken.