

Auto Loss Notice

Fax Completed Form to: Berends Hendricks Stuit at 616-531-6360

General Information:

Date of Loss:	Location of Loss:
Police:	Report Number:
What Happened:	

Insured Vehicle:

Year, Make, Model:	VIN:
Driver's Name:	
Damage to Vehicle:	
Probably Amount of Loss:	Shop Name and Phone:

Other Party:

Name & Address:	
Home Phone:	Work Phone:
Property Damaged:	
Insurance Information:	

Reported By:

Name:	Phone:
Company Name:	Date: