



Damage to Property Owned by Others

Date of Loss: \_\_\_\_\_ Time: \_\_\_\_\_ Location of Incident: \_\_\_\_\_

Description of Incident:

Claimant Information:

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone – Home: \_\_\_\_\_ Phone – Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Description of Damage:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please include any invoices or estimates with completed claim form to PUD Office.