

SecureGuard Insurance

Professional Insurance Services

INSURANCE CLAIM FORM

Denied

Priority: High

Claim Information

Claim ID: CLM-000049
Policy ID: POL-RJRSKRUMD
Incident Type: Property Damage
Incident Date: 2024-03-27
Report Date: 2024-03-28

Contact Information

Claimant: Ashley Hanson
Adjuster: Timothy Rich
Phone: (259)940-8822
Email: lguzman@example.com
Address: 043 Rogers Wall Suite 252, West Gary, DE 96906

Incident Description

damage to the occurred at 805 Kimberly Streets, South Jacob, KS 03481 during a severe weather event on 2024-03-27. Wind speeds reached mph.

Additional documentation and police reports have been filed with the appropriate authorities. All supporting evidence has been collected and is available for review upon request.

Expense Breakdown

Category	Description	Amount
Structural Repair	Roof repair	\$911.85
Cleanup	Professional cleaning	\$140.66
Cleanup	Professional cleaning	\$1318.98
Total Claim Amount		\$2371.49

Claimant Signature

Date: _____

Adjuster Signature

Date: _____

1234 Insurance Blvd, Suite 100, Financial District, NY 10001
Phone: 1-800-CLAIMS-1 | Email: claims@secureguard.com
www.secureguard.com

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