PRISM
Public Risk Innovation, Solutions, and Management

# Property Loss Report

## CLAIMS REPORTING

Alliant Insurance Services
Phone: (415) 403-1400 ext. 445
Fax: (415) 403-1466
E-mail report to: rfrey@alliant.com **AND** dwalizada@alliant.com
With a cc: to sandra.doig@mclarens.com
McLarens Fax: (949) 757-1692

## DATE AND TIME OF LOSS INFORMATION

Date of Report of Loss
Date of Loss
Time of Loss

Previously Reported? Yes ☐ No ☐

## INSURANCE COMPANY AND POLICY INFORMATION

Insurance Company PRISM Property
Policy Number PRISMPR 26-27
Effective Date 3/31/2026 - 3/31/2027

## INSURED INFORMATION

Name and Address
PRISM and its Member Agencies

**Member**

## CONTACT INFORMATION

Name
Address
City State Zip
Email
Phone Fax

## LOSS DETAILS

**Location of Loss**

Address
City State Zip

Is this a vacant building? Yes ☐ No ☐

**Kind of Loss**:

Fire ☐ Theft ☐
Water ☐ Hail/Wind ☐
Auto ☐ Boiler & Machinery ☐
Other ☐

**Police or Fire Dept to which reported**

**Estimated Amount of Total Loss (if known)**

**Description of Loss and Damage**

## POLICY INFORMATION

Mortgagee/Loss Payee Yes ☐ No ☐

| Item No. | Subject of Insurance | Amount | Deductible | Coverage |
|---|---|---|---|---|
| | Bldg ☐ Contents ☐ Other ☐ | | | |
| | Bldg ☐ Contents ☐ Other ☐ | | | |
| | Bldg ☐ Contents ☐ Other ☐ | | | |

## REMARKS/OTHER INSURANCE

**Reported by**