North Carolina Department of Insurance

State Property Fire Insurance Fund

LOSS REPORTING FORM

DIVISION		
	DATE REPORTED	
BUILDING NAME		
STREET ADDRESS		
DEPARTMENT/DIVISION #	COMPLEX #	ASSET #
ESTIMATED DAMAGE \$	CAUSE OF LOSS	
DESCRIPTION OF LOSS	(fire, wind, theft, etc.)	
	protection in-place, corrective action, attached report	ts, photographs, etc.)
CONTACT PERSON	TELEPHONE #	
REPORTED BY	TELEPHONE #	

GIVE PROMPT NOTIFICATION OF THE LOSS OR DAMAGE. FAILURE TO NOTIFY THE FUND WITHIN 30 DAYS OF LOSS OCCURRENCE MAY VOID YOUR COVERAGE. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT SPFIF AT (919) 661-5880; FAX (919) 662-4416.