



CITIZEN PROPERTY LOSS CLAIM REPORT

DIRECTIONS: This form must be completed by the citizen. Send the completed form to: Risk Management, Office of Comptroller, Gatehouse Administration Center, 8115 Gatehouse Rd, Falls Church, VA 22042. (Telephone #: 571-423-3620) (Fax #: 571-423-3627)

GENERAL INFORMATION

1. Name: Last			First			MI					
2. Address: Number and Street			City			State			Zip Code		
3. Telephone Number:				4. Date of Birth:				5. Sex:			
								<input type="checkbox"/> Male <input type="checkbox"/> Female			

LOSS INFORMATION

6. Description of Property Lost or Damaged:											
7. When Loss Occurred: Date			Day of the Week			Exact Time			<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		
8. Location of Loss: Name of School or Office						9. Specific Area of School or Office:					
10. Description of Occurrence:											

11. Witnesses: Name		Address				Telephone	

PREPARATION INFORMATION

12. Date:				13. Signature:							
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