

CONTENTS LOSS INVENTORY

for office use only

Quantity	ITEMS: Complete Description, Model No., Serial No. Brand Named, Etc. (use as many lines as needed for full description)	Place of Purchase	Purchase Date Month/Year	Replacement cost	Repair cost	
			1			
			1			
			1			
			1			
			1			
			1			
			1			
			1			

Applicable to New York Only:

For your protection, New York Law Requires the following to appear on this form: "Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material hereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each violation"

Insured's signature _____ Claim Number _____

Insured's signature (Spouse)_____