



Agent for



Property Damage Claim Form
NO LIABILITY IS ASSUMED BY REASON OF THIS REQUEST

Date: _____

Order Number: _____

Name Of Claimant / Owner Of Property: _____

Date Of Loss: _____

Name Of Customer: _____

Do You Own Or Rent The Property: _____

Address Of Property Where The Damage Occurred: _____

Phone # _____ City: _____ State: _____ Zip Code: _____

<i>Type & Location Of Damage</i>	<i>Description Of The Damage</i>	<i>Amount Claimed</i>

Remarks /
Comments: _____

***As the claimant, I certify that I am the owner of the property and / or have written authorization from the owner to process this claim on their behalf.
*** I did not cause or contribute to the damage set forth herein.
***All statement made in this statement of claim and any attached document is true & correct to the best of my knowledge.
***No material information has been withheld.
***This constitutes my complete and entire claim

Signature of Claimant: _____ Date: _____

Please return claim to cameronduggins@smmoving.com

3637 E. Miami Avenue • Phoenix, AZ 85040
602.586.3200 • 800.528.4561 • Customer Service Fax: 602.470.0345 • Operations Fax: 602.437.3460
www.smmoving.com

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