

CUSTOMER INCIDENT notification worksheet

Policy number TBC-Z91-460156-022	Effective dates 10/18/2012-10/18/2013
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Location contact	Phone number
Date of loss	Time of loss
Location of loss	Location code
Authority notified	
Complete description of incident	

Property damage	
Owners name	Phone number
Address	
Damages	Estimate

Bodily injury	
Injured party	Phone number
Address	
Description of injury	
Treatment	

Witnesses	
Witness name	Phone number
Witness name	Phone number

Report Completed By: _____ Date of Report: _____

Report GL claims to Liberty Mutual. Phone: 800-266-2800. Fax: 800-329-3297.**If you have any questions regarding a claim, contact Lori Phillips with Wells Fargo at 404-923-3558 or lori.phillips@wellsfargo.com.**