

# NOTICE OF LOSS - NATIONAL GENERAL

Please complete as many sections as possible and submit any supporting documentation. Return to [claims@suigroup.com](mailto:claims@suigroup.com)



Southeastern Underwriters, Inc.

Date Reported:

## BUSINESS CONTACT INFORMATION

### Lender/Client or Property Management Company

Company Name:  
Company Contact Person:  
Phone | Fax:  
E-mail:  
Company Address:  
Street, City, State ZIP Code:

### Agent Information

Agency Name:  
Agency Contact Person:  
Phone | Fax:  
E-mail:  
Company address:  
Street, City, State ZIP Code:

## BORROWER/TENANT/COMMUNITY/INVESTOR

Occupant/Tenant:  
Insured Location:  
Street, City, State ZIP Code:  
Mailing Address (if different):  
Phone:  
E-mail:

Apartment Community/Investor:  
Primary business address:  
Street, City, State ZIP Code:  
Phone:  
Fax:  
E-mail:

## INSURANCE INFORMATION

Loan number/Investment #: Certificate number  
Master Policy Number: Certificate Eff and Exp Date:  
Provide a copy of Evidence of Insurance with this loss form along with any other supporting documents for the claim

## LOSS INFORMATION

Date of Loss

### Type of Loss:

Fire Wind  
Water  
Other (please specify)

### Property Type:

Residential Occupied	Residential Vacant
Commercial Occupied	Commercial Vacant
Mobile Home Occupied	Mobile Home Vacant
REO Occupied (Tenant)	REO Vacant
Other (please specify)	Tenant Occupied

Description of Loss: Damages:  
Contact:  
Access information:  
Special Instructions for inspector:

Claim reported by: Phone:  
Reported by company: Email: