

PROPERTY LOSS REPORT

BASIC INFORMATION

University of Wisconsin - Madison

BUILDING NAME

BUILDING NUMBER

NAME OF PERSON REPORTING LOSS

PHONE NUMBER

DATE OF LOSS (MM/DD/YYYY)

TIME OF LOSS (HOUR, AM/PM)

ABOUT THE ITEMS LOST...

PLEASE LIST THE FOLLOWING INFORMATION:

INV# (If Applicable)	DESCRIPTION (Name, Model, Ser. #, Etc.)	YEAR ACQUIRED	REPL. COST
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CAUSE OF LOSS

WHAT WAS THE CAUSE OF LOSS?

DESCRIBE HOW THE LOSS OCCURRED:

IF FIRE WAS THE CAUSE OF LOSS, WHICH FIRE DEPARTMENT ATTENDED?

IF THEFT, V&MM, OR COLLISION, A POLICE REPORT IS REQUIRED.

POLICE DEPARTMENT:

INVESTIGATING OFFICER:

CASE NUMBER:

ESTIMATE OF DAMAGE

IS IT A TOTAL LOSS?

IF YES, LIST VALUE:

ANY SALVAGE?

IF YES, LIST VALUE:

WHO WAS THE ESTIMATE MADE BY?

WHO WILL MOST LIKELY DO THE REPAIR WORK?

WHAT IS THE ESTIMATED REPAIR TIME?

SIGNATURE

DATE OF REPORT

SIGNATURE OF PERSON FILING REPORT

YOUR DEPT NAME