

# Home Fire Damage Loss Statement

## Policy Holder Information

Full Name

Address

Policy Number

## Incident Details

Date of Fire

Time of Fire

Description of Incident

## Property Damage Inventory

Item Description	Location	Estimated Value	Condition Before Fire	Remarks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Additional Comments

Signature

Date