

# Building Structure Loss Complaint

## Complainant Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Email: \_\_\_\_\_

## Property Information

Property Location: \_\_\_\_\_  
Type of Building: \_\_\_\_\_  
Ownership Status: \_\_\_\_\_

## Details of Loss / Damage

Date of Incident: \_\_\_\_\_

Description of Loss:

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## Action Taken

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## Other Remarks

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\_\_\_\_\_  
Signature over Printed Name

Date: \_\_\_\_\_