**Date:** Click or tap to enter a date. **Who were you referred by?** Click or tap here to enter text.

**Client Name(s) S.S.** Click or tap here to enter text.

Click or tap here to enter text. **S.S.** Click or tap here to enter text.

**Property Address** Click or tap here to enter text.

**City** Click or tap here to enter text. **County** Click or tap here to enter text.

**State** Click or tap here to enter text. **Zip** Click or tap here to enter text.

**Subdivision:** Click or tap here to enter text. **E-Mail** Click or tap here to enter text.

**Mailing Address if different from above** Click or tap here to enter text.

**Primary Telephone** Click or tap here to enter text.

**Name** Click or tap here to enter text. **Home** Click or tap here to enter text. **Work** Click or tap here to enter text. **Cell** Click or tap here to enter text.

**Name** Click or tap here to enter text. **Home** Click or tap here to enter text. **Work** Click or tap here to enter text. **Cell** Click or tap here to enter text.

**Date property was purchased** Click or tap to enter a date. **New\_\_\_\_\_\_ Pre-owned \_\_\_\_\_\_\_\_\_**

**Property Owner’s Insurance Company** Click or tap here to enter text.

**Address** Click or tap here to enter text.

**Telephone** Click or tap here to enter text. **Fax** Click or tap here to enter text.

**Policy No.** Click or tap here to enter text. **Policy Period** Click or tap here to enter text.

**Claim No.**Click or tap here to enter text. **Date of Claim** Click or tap here to enter text.

**Adjuster: Name** Click or tap here to enter text.

**Mortgage Company** Click or tap here to enter text.

**Address** Click or tap here to enter text.

**Amount of Payoff** Click or tap here to enter text. **Current?** Click or tap here to enter text. **Date of Last Payment** Click or tap here to enter text.

**2nd Mortgage Company** Click or tap here to enter text.

**Address** Click or tap here to enter text.

**Amount of Payoff** Click or tap here to enter text. **Current?** Click or tap here to enter text. **Date of Last Payment** Click or tap here to enter text.

**Are you involved in a bankruptcy proceeding?** Click or tap here to enter text.

**Is the home in foreclosure? No If so, state Court & File No.** Click or tap here to enter text.

**Do you own your home? Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_**

**Is your home a: house \_\_\_\_\_\_ apartment\_\_\_\_\_\_ condo \_\_\_\_\_\_trailer/mobile home\_\_\_\_\_\_\_\_**

**Have you contacted your insurer? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_ No Insurance \_\_\_\_\_\_\_\_\_\_\_\_\_**

**If yes, what was their response?** Click or tap here to enter text.

**Have you stayed at a hotel or other lodging that you paid for because your home is not fit to live in due to the hurricane? Yes \_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_**

**If yes, how many days have you paid for alternative accommodations? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is the amount paid to date $\_\_\_\_\_\_\_\_\_\_\_ What is the amount per day $\_\_\_\_\_\_\_\_\_\_\_\_**

**Has your insurer paid you any money for alternative accommodations?**

**Yes \_\_\_\_\_No\_\_\_\_\_ If yes, when and how much $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have any of the following been damage:**

**Roof \_\_\_\_\_\_\_\_\_\_\_\_ Windows \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Walls \_\_\_\_\_\_\_\_\_\_\_\_\_ Pool screen \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Trees/landscape \_\_\_\_\_\_\_\_\_\_\_\_\_ Automobiles \_\_\_\_\_\_\_\_\_\_\_\_\_\_Other structure\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other Damages (please list)** Click or tap here to enter text.

**Please list all major personal property damaged/destroyed** Click or tap here to enter text.

**Have you obtained an estimate of the amount of damage to your home and/or personal property? Yes\_\_\_\_\_\_ No\_\_\_\_\_ If yes, by who?** Click or tap here to enter text.

**Has the insurer been to your property? Yes \_\_\_ No \_\_\_, If so, what happened?** Click or tap here to enter text.

**How much money are you seeking from the insurance company $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is the basis for that amount?** Click or tap here to enter text.

**Has the insurance company offered any money to resolve your claim? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_**

**If yes, how much $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ When was it offered? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you accepted or rejected the offer in writing? Yes\_\_\_ No \_\_\_\_ If yes, when:**Click or tap here to enter text.

**Have you given a notarized list of the damages to your insurer?**

**Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_ If yes, when?** Click or tap here to enter text.

**If no, has your insurer requested such a list?**

**Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_ If yes, when was it requested?** Click or tap here to enter text.

**Do you have dated photographs of damage? Yes \_\_\_\_\_ No \_\_\_\_ If yes, please bring them.**

**Are you currently represented by another attorney on any matter? Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_**

**Has either party ever been convicted of a crime? Yes\_\_ No \_\_\_If yes, please provide details:** Click or tap here to enter text.

# PLEASE SEE FOLLOWING PAGE

### Please Bring the Following Documents

* Any and all correspondence from your insurance carrier
* Any and all photographs, video tape, etc.
* Copy of your homeowner’s insurance policy(s)
* Policy Declaration Sheet (representing the year the claim was filed)
* Repair Estimates
* Engineering reports
* Notes, Diary or Log of damage(s), data or any other information which may prove useful in providing a comprehensive review of the issues.