



PROPERTY CLAIM FORM

| DISTRICT INFORMATION | | <u>CONTAC</u> | <u>TINFORMATION</u> | |
|-------------------------------------|-------------------|-------------------|------------------------------------|--|
| 550 Blumont Street | | Name: | Name: | |
| Laguna Beach, CA 92651 | | Title: | | |
| Date of Loss: | | Phone: | | |
| Time: | 🗆 am 🗆 pm | Email: | | |
| LOSS LOCATION | | | | |
| Site Name: | | Site Conta | act: | |
| Address: | | | | |
| Phone: | | | | |
| Type of Loss: \Box Fire \Box Th | eft 🗆 Lightenir | ng 🗆 Hail 🗆 Floo | od 🗆 Wind 🗆 Water/Weather | |
| ☐ Water/Non-Weather ☐ (| Other (Explain) : | | | |
| Description of Loss or Dama | ige: | | | |
| | | | | |
| | | | | |
| Describe Measures Taken to | o Minimize Loss/ | Damage: | | |
| | | | | |
| | | | | |
| Police or Fire Department to | o which Loss/Dai | mage was reported | l (include for theft or vandalism: | |
| | | Report #: | : | |
| Suspect(s) Apprehended | ☐ Yes ☐ No | □ Unknown | | |
| Area Canvassed | ☐ Yes ☐ No | □ Unknown | | |
| Completed by: | | | Date: | |
| | | | | |

Submit form to LBUSD Facilities, 550 Blumont St, Laguna Beach, CA 92651

| DISTRICT USE ONLY | DATE RECVD / / | SCANNED / / | DRIVEUPLOAD / / | |
|------------------------------|----------------|------------------------------------|-----------------|--|
| DATE SUBMITTED TO KEENAN / / | | KEENAN CONTACT alacoste@keenan.com | | |