



Damage to Property Owned by Others

Date of Loss: _____ Time: _____ Location of Incident: _____

Description of Incident:

Claimant Information:

Name: _____

Mailing Address: _____

Phone – Home: _____ Phone – Cell: _____

Email: _____

Description of Damage:

Signature: _____ Date: _____

*Please include any invoices or estimates with completed claim form to PUD Office.