

4. PROPERTY DAMAGE

Property Loss / Damage Claim Report

1. Use these forms to report any potential loss or damage to property on any AES Electrical jobsite. Update the forms as additional information is obtained.
2. This form must be completed as soon as there is notification of any damage or loss. Please complete forms with as much information as possible.
3. Attach other information that will help facilitate the claim processing such as photos, estimates of damage, inventory of damaged/missing items, copies of estimates, bills/invoices for repairs/replacement, and proof of payment for any items.

Date and time of loss/damage:
Address of loss/damage:
Job Number:
Project Manager:
Division:

Cause of Loss					
(mark all that apply)					
Fire and/or smoke	<input type="checkbox"/>	Roof Leak	<input type="checkbox"/>	Theft or Vandalism	<input type="checkbox"/>
Lightning	<input type="checkbox"/>	Pipe Leakage	<input type="checkbox"/>	Transit / during shipment	<input type="checkbox"/>
Hazardous materials release / contamination	<input type="checkbox"/>	Backup of sewers or drains	<input type="checkbox"/>	Electrical failure or disturbance	<input type="checkbox"/>
Flood	<input type="checkbox"/>	Underground seepage	<input type="checkbox"/>	Utility interruption	<input type="checkbox"/>
Explosion	<input type="checkbox"/>	Escaped fluids	<input type="checkbox"/>	Vehicle	<input type="checkbox"/>
Wind	<input type="checkbox"/>	Mechanical breakdown	<input type="checkbox"/>	Spoilage	<input type="checkbox"/>
Earth movement, settling, or cracking	<input type="checkbox"/>	Computer virus or cyber attack/threat	<input type="checkbox"/>	Other (provide explanation below)	<input type="checkbox"/>
Other / Notes:					

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1. Were there any witnesses to the Loss/Damage? Please provide information below:

Witness Name	Witness Phone number
1.	
2.	
3.	

Witness Statement:

2. Were the Police, Fire Department contacted? Please provide information below:

Police/Fire Department	Officer/Fireman Name	Police/Fire Report Number

(Signature of person filling out report)

(Date)

All forms must be sent to Human Resources (kmason@aeselectrical.com) – or by fax (301) 595-2839.

If emailing the forms, make sure to send to the Project Manager and the Superintendent for the job.