

HEATHERSTONE HOMEOWNERS' ASSOCIATION

200 Apples Way, Batavia, Ohio 45103

Statement of Proof of Loss

WARNING FRAUD PREVENTION

Any person who, knowingly and with intent to defraud any insurance company, the Heatherstone HOA, or other person, files or conceals, for the purpose of misleading, a statement of claim containing any materially false information, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and subjects such a person to criminal and civil penalties.

At time of loss, the insured interest of
NAME (PRINT): _____

MAILING ADDRESS: _____

PHONE NUMBERS:
DAY _____, EVENING _____, CELL: _____

EMAIL ADDRESS: _____

ADDRESS OF UNIT SUSTAINING LOSS: _____

TIME AND ORIGIN

A _____ loss at about the hour of _____ o'clock on
_____ day of _____ (month) of _____ (year). The cause and origin of said loss
was _____

Attach any supporting documentation.

OCCUPANCY The unit described above, was occupied at the time of the loss as follows, and for no other purpose whatsoever than: _____

Names of all persons residing at address of unit when the loss occurred and relationship to unit owner

Was this unit owner occupied? Yes _____ NO _____

TITLE AND INTEREST

At the time of loss, the interest of the insured in the property described therein was (name of person(s))

No other person(s) had any interest therein or encumbrance thereon, except: _____

All statements made by me on this form are true. Signed by _____
Printed name _____ Date _____

*****DO NOT WRITE BELOW THIS LINE. FOR HHOA USE ONLY*****

Date received: _____, Claim covered by HHOA policy YES _____ NO _____

Not covered by HHOA Policy Due to: _____

Date HHOA insurance company notified of claim _____

Attach any correspondence to this form