

Commercial Insurance Statement Form

The **commercial insurance statement form** sample is designed to simplify the process of filing business claims efficiently. This form ensures that all essential information is accurately captured to support the claim review. Utilizing this template helps businesses expedite their insurance reimbursement and maintain proper documentation.

1. Policyholder Information

Business Name:

Policy Number:

Contact Person:

Email Address:

Phone Number:

Business Address:

2. Incident Details

Date of Incident:

Location of Incident:

Description of Incident:

Was it reported to authorities? (Yes/No):

If yes, which authority and report number:

3. Claim Information

Type of Claim (Property/Equipment/Liability/etc.):

Estimated Amount of Loss (USD):

List of Attached Supporting Documents:

4. Declaration and Signature

I hereby declare that the information provided above is accurate and complete to the best of my knowledge.

Authorized Signature:

Date:

Submit Claim