

**STATE OF NEW MEXICO
PROPERTY LOSS NOTICE**

(Please print clearly)

DATE & TIME OF LOSS: _____

LOCATION OF LOSS: _____

ADDRESS OF BUILDING: _____

STATE AGENCY INVOLVED: _____

CONTACT PERSON'S NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE #: _____ FAX #: _____

TYPE OF LOSS (Check One): FIRE THEFT LIGHTNING
 HAIL FLOOD WIND OTHER _____

DESCRIPTION OF PROPERTY DAMAGED: _____

BUILDING DAMAGE: _____

CONTENTS: _____

MACHINERY/EQUIPMENT: _____

WHAT HAS BEEN DONE TO PREVENT FURTHER DAMAGE? _____

DOES THE STATE OWN THE BUILDING? YES NO

IF PROPERTY IS LEASED, LIST FROM WHOM _____

ESTIMATED COST OF DAMAGES \$ _____

LIST NAME & TELEPHONE NUMBER OF PERSON REPORTING THIS CLAIM:

MAIL OR FAX COMPLETED FORM TO: GSD/RMD/ Property and Casualty Bureau
Attn: Velma Herrera
P. O. Box 6850
Santa Fe, NM 87502
FAX # (505) 827-2969