



GENERAL LIABILITY NOTICE OF OCCURRENCE/CLAIM

Date (mm/dd/yy)

Producer	Company	Date of occurrence	
	Policy Number	Time	AM PM
Phone number (A/C, no., ext.)	Effective Date	Expiration Date	

Insured		Contact	
Name and address of insured	Residence Phone	Name and address of insured:	Residence phone
	Business Phone		Business phone

Occurrence

Location of occurrence (include city and state)

Description of occurrence

Policy Information

Coverage part or forms (insert form numbers and edition dates)

General Aggregate	Prod/Comp Op Agg	Pers & Adv Inj	Each Occurrence	Fire damage	Each Occurrence
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Deductible PD BI

Injured/Property Damaged

Name & Address (injured/owner)			Phone (A/C, No, Ext)	
Age	Sex	Occupation	Employer's name and address:	Phone (A/C, No, Ext.)
Describe injury		Describe property (type, model, etc)	Estimate amount:	Where can property be seen?

Fatality

Witnesses

Name and Address	Business Phone (A/C, No, Ext.)	Residence Phone (A/C, No.)

Remarks

Reported by

Reported to

Applicable in Arizona: For your protection, Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

Applicable in Arkansas, Kentucky, Maine, Michigan, New Jersey, New Mexico, New York, Pennsylvania, and Virginia: Any person who knowingly and with intent to defraud any insurance company or another person, files a statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, subject to criminal prosecution and [NY: substantial civil penalties. In Maine and Virginia, insurance benefits may also be denied.

Applicable in California: Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.

Applicable in Colorado: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in Florida and Idaho: Any person who knowingly and with the intent to injure, Defraud, or Deceive any Insurance Company Files a Statement of Claim Containing any False, Incomplete or Misleading information is Guilty of a Felony.*
* In Florida - Third Degree Felony

Applicable in Hawaii: For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.

Applicable in Indiana: A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony.

Applicable in Minnesota: A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

Applicable in Nevada: Pursuant to NRS 686A.291, any person who knowingly and willfully files a statement of claim that contains any false, incomplete or misleading information concerning a material fact is guilty of a felony.

Applicable in New Hampshire: Any person who, with purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.

Applicable in Ohio: Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Applicable in Oklahoma: WARNING: Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.