Gene Terry, Executive Director P.O. Box 2131; Austin, Texas 78768 1-800-456-5974 / 512-478-8753 / 512-615-8942 fax

## GENERAL LIABILITY CLAIM LOSS REPORT

## Please indicate type of claim:

Incident Report Only Making [General Liability] Claim

Entity No.:	Date of Incident:
	Date Reported:
Member	Reported by:
Address:	Contact Name:
City/State/Zip:	Contact Phone No.:
	E-MAIL:
Description of Incident:	
Claimant or Other Involved:	
Address:	
City/State/Zip:	
Claimant Vehicle or Other Property: (Year: Make; Model; Damage, etc.)	Phone / Contact Info:
Injury:	
Member Operator:	Department:
Contact Info:	Contact Info:
Member Equipment:	Where is it located:
(if any involved)	
Identification Number:	
Damaged?	
Other Information:	

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