



THE NAVAJO NATION

PROPERTY LOSS REPORT

DATE (MM/DD/YY)

PROGRAM	Department/Division/Section		
	Person To Contact		Phone No.
FACTS	Date of Loss	Time AM <input type="checkbox"/> PM <input type="checkbox"/>	Kind of Loss: (Fire, Wind, Explosion, etc.)
	Location of Loss:		
	Description of Incident		
PROPERTY	Who was Notified? Name Address Phone No.		
	Description of Property Involved:		
POLICE/FIRE REPORT	Estimated Amount of Loss	Property I.D. No.	Square Footage
	District	Report No.	Officer and I.D. No.
RESPONSIBLE PARTY	Name (Individual or Firm)		
	Address		Phone No.
WITNESSES	Name	Address	Phone No.
	Name	Address	Phone No.
REMARKS			

This report must be completed and sent to
 Risk Management Department
 The Navajo Nation
 Post Office Box 1690
 Window Rock, Arizona 86515
 (520) 871-6335/6475

Reported By _____ Date _____

Authorized Supervisor _____ Date _____

PLEASE REPORT LOSS WITHIN 3 WORKING DAYS