



**Risk Management Program**  
 808 Dr. Martin Luther King Drive  
 Little Rock, Arkansas 72202  
 Phone: 501-372-1415 Toll Free: 800-482-1212  
 Fax: 501-375-2454 Email: insure@arsba.org

## PROPERTY LOSS NOTICE

Date of Loss: \_\_\_\_\_ Previously Reported? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, by phone: \_\_\_\_\_ by mail: \_\_\_\_\_  
 Time of Loss: \_\_\_\_\_ AM / PM If yes, to whom? \_\_\_\_\_  
 LEA# \_\_\_\_\_ Original submission date: \_\_\_\_\_

SCHOOL DISTRICT / ADDRESS	CONTACT PERSON	PHONE NUMBER(S)
	E-mail: _____	
	SUPERINTENDENT	PHONE NUMBER(S)
	E-mail: _____	
LOSS LOCATION (Campus or Building)	POLICE OR FIRE DEPARTMENT	CONTACT PERSON
		PHONE NUMBER

KIND OF LOSS (Burglary, Theft, Fire)	PROBABLE AMOUNT OF ENTIRE LOSS
	\$ _____

DESCRIPTION OF LOSS

MISCELLANEOUS INFORMATION

COMMENTS:

Signature and Title: \_\_\_\_\_ Date: \_\_\_\_\_