

LIGHTNING DAMAGE STATEMENT

*ALL BLANKS/QUESTIONS MUST BE ANSWERED OR FORM MAY BE REJECTED
PLEASE PRINT*

I inspected/repaired a (Item damaged) _____ (Brand) _____

Model No. _____ Serial No. _____ Age _____

Size _____ Place Purchased _____

Are damaged items or parts available for inspection? ___ yes ___ no

If not, why? _____

In my professional opinion, the amount of the attached estimate or repair bill of \$ _____ is due solely to lightning and no other cause.

The amount of damage that cannot be established as caused by lightning is \$ _____

Does the item have salvage value? ___ yes ___ no If so \$ _____

IF yes, I will pay salvage in the amount of \$ _____

In my professional opinion, the damage was solely due to lightning because _____

Firm Name _____

Address _____

Phone _____

Technician's Signature _____ Date _____

LC No. _____

KEEP ALL DAMAGED ITEMS FOR POSSIBLE INSPECTION UNTIL CLAIM IS SETTLED.