

CLIENT INFORMATION FORM - FIRE CASES
(Taken from Ins. Co. EUO Exam Format)

A. BACKGROUND

1. Insured's Name_____
2. Insured's Date of Birth_____
3. Insured's Social Security No._____
4. Insured's residency history (10 years) (attach separate sheet if necessary)

5. Marital history-names, addresses, dates, places of marriages and/or divorce, disputes, violence, counseling

6. Children and their ages_____

7. Medical history/hospitals_____

7. Employment history - self/spouse - 10 years (attach separate sheet if necessary)

B. PROPERTY HISTORY

1. Purchase: from whom/when/what amount_____

2. Mortgages: who/amount/payment status before and after loss

3.

Ownership/Title_____

4. Description: Security/alarm systems; heating/cooling system/fire protection systems/breaker location/gas/electric service/utilities/

diagram/doors/windows/blueprints/building plans/locks/keys

5. Separate structures:_____

6. Residents at date of loss & their relationship to you:

7. For sale - contracts, appraisals, price, realtor:

C. INSURANCE

1. Who obtained _____

2. Agent _____

3. Policy application: when/how/determine amounts, names on policy, identify application and signatures, special schedules, discussions re: prior losses

4. Prior cancellations/non-renewals of personal or business insurance:

5. Changes since inception of Policy _____

6. Prior insurance history _____

7. Claims under policy_____

D. NEIGHBORHOOD

1. Location/names neighbors_____

2. Other fires_____

3. _____
Vandalism_____

E. PRIOR CLAIMS HISTORY IN DETAIL

Attach separate sheet

F. FINANCIAL HISTORY

1. Banks - all checking and savings accounts, etc. (list location of bank, account number & name of signatories)

2. Real property holdings_____

3. Boats/cars - descriptions and how titled_____

4. Credit cards w/account numbers_____

5. All loans - amounts, dates, history of payments_____

6. Inheritance/income sources_____

7. Tax Returns_____

8. Property taxes and personal property taxes_____

9. Expenses - attach list

G. LITIGATION HISTORY

Attach list of parties involved, county and state where suit filed, name of court and case number and outcome

H. CRIMINAL CONVICTIONS/ARRESTS/CHARGES

Attach list

I. ENEMIES/THREATS

Attach list including names, dates, reasons for threats, police reports file, etc.

J. FIRES

1. When last home/business_____
2. Was premises locked when last left?_____
3. Alibi - who, when, where_____

4. How you learned of the fire - who was present?_____

5. Weather conditions at the time of the fire_____

6. Any flammables on premises?_____

7. Did insured see fire (outline observations)_____

- _____
- _____
8. Extent of damage (attach separate sheet)
9. Did insured talk to firemen/investigators? If so, give specifics, names, titles, department affiliations

10. Does insured know of any eyewitnesses? If so, give names, addresses, etc.

11.

Pets _____

K. REPAIR ESTIMATES
(Attach copies)

L. EXPERTS RE: CAUSE OF FIRE

M. SUSPICIONS REGARDING FIRE:

1. Theories regarding cause _____

2. Any knowledge of who might have set the fire _____

N. DID INSURED SET THE FIRE?

O. PROOF OF LOSS

1. Identify structure_____
2. True and accurate_____
3. How arrived at figures_____

P. CONTENTS

1. List of items removed prior to fire (attach list)
- 2.

Salvage_____

3. Off-premises storage_____
4. Did insurance policy burn?_____
5. Family photos/keepsakes_____
6. Safe deposit box_____
7. Inventory
 - a. Detail
 - b. Amounts, e.g. replacement vs. what paid
 - c. Documents/repairs
 - d. Catalogs/stores

Q. ADDITIONAL LIVING EXPENSE

1. Receipts
2. Rent
3. Purchases
4. Extraordinary expenses
5. Any reimbursement

R. INVESTIGATION/ADJUSTMENT

1. What contacts has insured had with law enforcement officials?
2. Did insured take a polygraph?
3. Adjustment/Investigation by insurance company
 - a. When did insured first report loss?_____
 - b. Insured's quickness arrival/contact adjustment
 - c. Did insurance company return phone calls?_____
 - d. Did insurance company answer questions?_____

- e. Does insured have any complaints regarding insurance company, besides not being paid yet?

S. ANY ADDITIONAL ITEMS YOU WISH TO SUBMIT

Attach list