#### SPORTS & FITNESS INSURANCE CORPORATION

P. O. Box 1967

Madison, MS 39130-1967 Phone: 601-898-8464 Toll Free: 866-238-6922 Fax: 601-707-1035

http://curves.sportsfitness.com

# **Curves Property Loss Notice**

At Sports & Fitness Insurance, we try to make reporting a claim a simple 3 step process. If you follow these instructions, then we will process your claim as fast as possible.

### **Step 1 - Gather Information**

When reporting a notice of loss, please provide as much detail as is available. This should include, but not be limited to: Insured's Name, Contact Name, Policy Number, Date of Loss, Location of Loss, Cause of Loss, Your Policy or Reference Number, Initial Steps Taken to Mitigate the Loss, Type(s) of Damage and Estimated Amount of Loss.

## Step 2 - Report the Incident

The completed form should be mail to: Sports & Fitness Insurance Corporation

P.O. Box 1967

Madison, MS 39130-1967

866-238-6922

Fax: 601-707-1035

#### Step 3 – Follow-up with Customer Service

Your notice of loss report will begin processing immediately. You will receive a confirmation of the receipt of the notice with the contact information for the representative handling your notice.

#### **Loss Notice**

Date of Notice			Policy Type	Company and Policy Numbers		
Date of Loss and Time			PROP/	CO:		
			HOME	POL:		
			FLOOD	CO:		
			FLOOD	POL:		
				CO:		
			WIND	POL:		
INSURED						
Name and Address of Insured			Residence Pho	Residence Phone (A/C, No)		
			Business Phon	Business Phone (A/C, No, Ext)		
LOSS						
Location of Loss			Police or Fi	ire Dept to Which Reported		
KIND FIRE OF	LIGHTING	FLOOD	OTHER	Probable Amount of Loss		
LOSS THEFT	HAIL	WIND				
Description of Loss & Damage (Use separate sheet, if necessary)						
** All alaima are subject to a	<b>\$500 !!!</b>					

<sup>\*\*</sup> All claims are subject to a \$500 deductible.