



Attention: EPCOR Control Adjuster
 Crawford & Company (Canada) Inc.
 Unit 203, 3114 Calgary Trail NW
 Edmonton, Alberta T6J 6V4
 Tel: 780-486-8000 Fax: 780-486-8090 Email: epcor@crawco.ca

Statement of Damage/Injury Form

1. CLAIMANT INFORMATION:

First Name: _____ Last Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Daytime Phone: _____

E-Mail: _____

2. DESCRIPTION OF DAMAGED PROPERTY/INJURY: (include year/make/model/mileage for auto damage claims and date of last repair/replace)

3. INCIDENT DATE AND TIME:

MM/DD/YYYY: _____ TIME (24:00): _____

4. LOCATION OF INCIDENT:

(Please be specific referencing direction of travel, lane & closest intersection or reference point and enclose scene photos, diagram or map if needed)

5. AMOUNT OF CLAIM: (include how calculated and supporting documentation such as photos and estimates or receipts)

6. INSURANCE COMPANY AND POLICY: (if you carry insurance please provide the name of the company and your policy number)

I SOLEMNLY SWEAR THAT I AM THE OWNER/OCCUPIER OF THE PROPERTY DAMAGED, THAT THE FOREGOING IS A CORRECT AND ACCURATE STATEMENT AS TO THE DAMAGES INCURRED.

Owner: _____
 Signature

Date: _____

Please Note: Crawford & Company (Canada) Inc., as EPCOR's agent, will investigate the incident. The length of time to investigate is dependent upon the size and nature of the claim. This is not an admission of liability or a waiver of any limitation period.