FIELD LOSS WORKSHEET/DIAGRAM

Claim Number:
Insured:

Named Insured Home? Y / N

Storm Description:
Cause of Loss: _____

CAT Code:
Inspection Date: ___/___/___
Adjuster: _____

Number of stories: _____
Pitch: _____/ 12
Number of layers: _____

Roof Type: _____
Condition 1 2 3
(1 - below average / 2 - average / 3 - excellent)
Useful Life: _____yrs
Age of roof: _____yrs.
Depreciation: _____%

A:	=	***Roofing Items***	***Damage***	***Replacement***
B:	=	Turtle Vents:	**Y / N**	*EA*
C:	=	Turbine Vents:	**Y / N**	*EA*
D:	=	Power Vents:	**Y / N**	*EA*
E:	=	Ridge Vents:	**Y / N**	*LF*
F:	=	Valley Metal:	**Y / N**	*LF*
G:	=	Step Flashing:	**Y / N**	*LF*
H:	=	Plumbing Jack:	**Y / N**	*EA*
I:	=	Drip Edge:	**Y / N**	*LF*
J:	=	Vent Cap:	**Y / N**	*EA*
K:	=	Ridge Cap:	**Y / N**	*LF*
Actual Area:	**SQ**	Chimney Cap:	**Y / N**	*EA*
Waste 10% / 15%		Ice/Water Shield:	**Y / N**	*SF*
Total Area:	**SQ**	**Decking:**	**Y / N**	*SQ*