

GENERAL LIABILITY Property/Bodily Injury Claim Form

Send Form To: P&Lclaims@scac.sc Phone: 803-771-2530 Cell: 850-933-0491 Fax: 803-252-4556

Please attach any police reports or other documents which are available

Claim Type:	Bodily Injury:	Property Damage:		
Member/Departme	ent:			
Contact:		Work#:	Cell#:	
Incident Location:				
Incident Address:				
Date/Time of Incident:				
Incident Description	on:			

Claimant:	Work #:	Cell #:
Address:		
Witness:		
Address:		
Work#:	Cell#:	
Completed By:	Phone #:	Date: