



"INNOVATIVE ENGINEERING SOLUTIONS"

Investigative Engineering Request Form

PRI is happy to assist you with your investigative engineering needs. Please answer the following questions and fax to us at 734-429-8901.

Date of Loss: _____	Date of Assignment: _____
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Claims Adjuster: _____ Insurance / Adjusting Co: _____

Claim No.: _____ Phone: _____

E-Mail: _____ Fax: _____

Billing Address:	Correspondence Address (if different):
Attention:	Attention:

Please check the appropriate service(s) you require:

- Origin and Cause Cost of Replacement Loss Assessment Subrogation
- Scope of Damage Litigation Support Indoor Air Quality Construction Failure Analysis
- Accident Reconstruction Other _____

Please check the type of claim:

- Equipment Damage Vehicle Damage Insurance Fraud Fire and Explosion Damage
- Water and Mold Damage Lightning and Storm Damage Other: _____

Check if same as Insured

Insured Party Information:	Investigation/Loss Location:
Name:	Name:
Address:	Address:
Home:	Phone:
Work:	Claim No.:
Cell:	

Other Comments: _____

Completion Target Date: _____

SIGNED: _____

If enclosures are not as noted, kindly notify us at once