



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