



# LOSS PREVENTION – SEWER BACKUP FORM

Insured:  Policy No.:

Date of Loss:  Claim No.:

Specific Cause/Details of Loss:

		<u>YES</u>	<u>NO</u>
Precautions:	Backwater valve?	<input type="radio"/>	<input type="radio"/>
	Date installed? _____		
	Would a back water valve have prevented this loss?	<input type="radio"/>	<input type="radio"/>
	Sump pump in place?	<input type="radio"/>	<input type="radio"/>
	Date installed? _____		
	Would a sump pump have prevented this loss?	<input type="radio"/>	<input type="radio"/>
	Downspouts are disconnected from the weeping tiles or sewer drains?	<input type="radio"/>	<input type="radio"/>
	Does the yard surrounding the dwelling look to be properly graded?	<input type="radio"/>	<input type="radio"/>
	Has an annual sewer line inspection or cleaning been done in the last year?	<input type="radio"/>	<input type="radio"/>
	Would an inspection or cleaning have prevented the loss?	<input type="radio"/>	<input type="radio"/>

Prior Sewer Backup Loss(es) at this location:

Date:  Cause:

Date:  Cause:

Comments:

Adjusting Firm: \_\_\_\_\_ Adjuster: \_\_\_\_\_ Date: \_\_\_\_\_