

FARMERS MUTUAL OF NEBRASKA

Claim No. _____

REPAIRMAN'S STATEMENT

File No. _____

Reported Date Loss: _____

Before we can consider a claim for damage to electrical appliances, the Company needs evidence that the appliance was damaged by an insured peril. Any appliance rendered inoperative by the wearing out of parts is not covered by insurance.

So that the Company may consider this claim we ask that the statements below be completed and forwarded to the applicable agent or claims adjuster as requested.

Description of unit examined:

Manufacturer: _____ Model: _____ Age of Unit: _____

Did the unit fail due to wear and tear? Yes No

If no, I certify that I examined the unit referred to above and based on that examination it is my opinion the cause of the component damage was: _____

If lightning was the cause of damage:

Where did lightning enter the unit? _____

Where did lightning exit the unit? _____

What tests were conducted to determine the cause? _____

What components were damaged? _____

Was the damaged unit covered by warranty? _____

Was the damaged unit plugged into a surge protector? _____

What is the estimated cost of repairs? _____

What is the replacement cost of the damaged component? _____

What was the fair market value of the damaged component prior to the loss? _____

Please attach any applicable bills or estimates. I make this statement with the knowledge that Farmers Mutual Insurance Company of Nebraska will consider it in connection with the claim filed by the above named insured.

Date: _____ Repairman's Signature: _____

Firm Name: _____

Address: _____

Phone Number: _____

