



RENTAL LOSS INFORMATION

MID-SEASON		OFF-SEASON	
Daily Rental	\$	Daily Rental	\$
Weekly Rental	\$	Weekly Rental	\$
Monthly Rental	\$	Monthly Rental	\$
NON-CONTINUING EXPENSES			
Rental Management Fee	\$		
Rental Agency	\$		
Average Electrical	Daily: \$	Monthly: \$	
Average Water: per month	Daily: \$	Monthly: \$	
Other	Daily: \$	Monthly: \$	
Period of time for which rentals were cancelled	Form No.		
	<input type="checkbox"/> DP0001		
	<input type="checkbox"/> DP0002		
	<input type="checkbox"/> WHD001		
	<input type="checkbox"/> WHD5201		
PREVIOUS CLAIM INFORMATION			
Has claim been made under any other policy for rental loss?	<input type="checkbox"/> No <input type="checkbox"/> Yes Complete questions below.		
Name of Company			
Policy Number			
Amount Claimed			
Policyholder			
Claim Number			
Policy Number			
Property Location			

RETURN THIS FORM DIRECTLY TO NCIUA
ATTACH DOCUMENTATION OF YOUR RENTAL LOSS