

# Assignment Sheet



Assignment Date: \_\_\_\_\_ Claim #: \_\_\_\_\_ REF#: \_\_\_\_\_  
Loss Date: \_\_\_\_\_ Claim Paid:  Yes  No

## COMPANY INFORMATION

Company: \_\_\_\_\_ Representative: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_

## INSURED OR REPRESENTATIVE INFORMATION

Insured: \_\_\_\_\_ Representative: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Driver: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_

## ADJUSTER CONTACT INFORMATION

Adj. Co. \_\_\_\_\_ Adjuster: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_

## COMMODITY INFORMATION

Type or Description: \_\_\_\_\_  
\_\_\_\_\_  
Damage: \_\_\_\_\_  
Location: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Value: \_\_\_\_\_ Address: \_\_\_\_\_  
Notes: \_\_\_\_\_  
\_\_\_\_\_  
Charges, Towing, & Storage: \_\_\_\_\_  
Special Instructions: \_\_\_\_\_  
\_\_\_\_\_

Email this Assignment Form with all instructions, pictures, shipping documents, etc. to [claims@globalsalvagenetwork.com](mailto:claims@globalsalvagenetwork.com).