



Alliant Insurance Services, Inc.
4530 Walney Road, Suite 200
Chantilly, VA 20151

Phone: 855-279-AIHA Email: aiha-questions@alliant.com www.alliant.com/aiha

Claims Reporting Form

Insured Information:

Name Insured:

Policy No:

Contact Person:

Address:

City:

State:

Zip Code:

Business Telephone:

Home Telephone:

E-Mail Address:

Cell Telephone:

Claim Information:

Date of Loss:

Time of Loss:

Location of Loss:

Claimant Name:

Contact Info:

Description of Loss: (Please provide a summary of the facts surrounding the loss as you know of them):

If suit papers were received, please provide the following:

Date Received:

Taken By:

*Please attach copy of any relevant supporting information to the claim (demand letter, suit papers, etc) and email with claim form to:
Lina Millirons at lina.millirons@alliant.com*