



Please provide the requested information to the extent possible. This form will be reviewed along with other information by the Foresight Network and individual affiliates before the acceptance of the matter. The Foresight Network or individual affiliates reserve the right to decline to engage or remain engaged in any matter at their respective discretion.

OWNERS INFORMATION:

OWNERS NAME: Click or tap here to enter text.

OWNERS MAILING ADDRESS: Click or tap here to enter text.

OWNER CONTACT: Individual Owners' Name

OWNER PHONE NUMBER: Click or tap here to enter text.

OWNER E-MAIL ADDRESS: Click or tap here to enter text.

OWNER ADDRESS: Click or tap here to enter text.

PARTY TO INVOICE:

INDIVIDUAL: Click or tap here to enter text. **COMPANY NAME:** Click or tap here to enter text.

ADDRESS: Click or tap here to enter text.

PHONE NUMBER: Click or tap here to enter text.

E-MAIL ADDRESS: Click or tap here to enter text.

RELATIONSHIP TO OWNER: Click or tap here to enter text.

SELF ATTORNEY REPRESENTATIVE PUBLIC ADJUSTER OTHER

PLEASE NOTE THAT PAYMENT FOR PROFESSIONAL SERVICES IS DUE UPON RECEIPT OF THE INVOICE AND CANNOT BE CONTINGENT UPON ANY SPECIFIC OUTCOME OR RESOLUTION OF A GIVEN MATTER. Performance of any work is subject to the rates, terms, and conditions of the Foresight Technical Network and those of the individual engaged affiliates.

BUILDING/SITE INFORMATION:

SITE NAME: Click or tap here to enter text.

SITE ADDRESS: Click or tap here to enter text.

SITE COUNTY/PARISH: Click or tap here to enter text.

SITE TYPE (USE): Choose an item.

NUMBER OF BUILDINGS ON SITE: Click or tap here to enter text.

AGE OF BUILDING (SOURCE): Click or tap here to enter text. (Choose an item.)

LAST TIME PROPERTY WAS SOLD (SOURCE): Click or tap here to enter text. (Choose an item.)

SITE ACCESS COORDINATION: Choose an item. **(Contact Name) (Contact Phone Number) (Contact E-Mail Address)**





REPORTED EVENT INFORMATION:

TYPE OF OCCURRENCE: Choose an item.

DATE OR PERIOD OF OCCURRENCE: Click or tap here to enter text.

REQUESTED SCOPE OF WORK: (CHECK ALL THAT APPLY)

- Initial Site Documentation Site Measurements and Documentation Repairability
- Forensic Engineering (Cause of Damage)
- Forensic Engineering (Extent of Damage)
- Forensic Engineering (Document Review (Specify))
- Engineering (Other (Specify))
- Other: (Specify)

REFERENCE INFORMATION: ROOFING SYSTEMS: (APPLICABLE TO ROOFING MATTERS):

- TYPE OF ROOFING SYSTEMS PRESENT:** Asphalt-Composition Shingle: Three-tab-style
 Asphalt-Composition Shingle: Laminate-Style Asphalt-Composition Shingle (Other-Styles)
 Built-Up Roof (Asphalt Flood Coat) Built-Up Roof (Gravel Ballasted)
 Built-Up Roof (Modified-bitumen Cap Sheet) Clay (Ceramic) Tile Concrete Tile
 Metal Panel (Side Overlap) Metal Panel (Standing Seam)
 Ethylene Propylene Diene Monomer (EPDM) Membrane
 Polyvinyl Chloride (PVC) Roof Membrane Single-ply Membrane (Not-specified)
 Spray Polyurethane Foam (SPF) Thermoplastic Olefin (TPO) Membrane
 Other (Specify): Click or tap here to enter text.

AGE OF ROOFING SYSTEMS (SOURCE): Click or tap here to enter text. (Choose an item.)

HISTORY OF REPAIRS TO ROOFING SYSTEM PRIOR TO THE ROOFING SYSTEMS: Choose an item. (Discussion of Previous Repairs)

HAVE TEMPORARY REPAIRS BEEN COMPLETED AT THE SITE: Choose an item. (Discussion of Temporary Repairs)

History of Internal Roof Leaks: Choose an item. (Discussion of location and when any leaks were initially observed)

ROOF ACCESS: Choose an item.

ANY ACCESS LIMITATIONS TO THE ROOF SURFACE(S): Click or tap here to enter text.





REQUESTED DOCUMENTATION:

It is requested that any of the following documentation be provided to the Foresight Technical Network (when available). It is understood that some or all of this information may not be available.

1. Repair Estimates (Scopes of Work) from any party related to the subject reported loss.
2. Images or video from the date of occurrence or after the date of occurrence and showing the reported damage (from any available source).
3. Names and contact information for any known parties that observed the reported storm or damage event.
4. Copies of any previous inspection, underwriting, or other documentation that can establish the condition of the building, roofing system, or another involved building element at any specific time in the past.
5. Copies of any previous engineering reports, plans, or other known documents relating to the evaluation of damage to the subject type of building.
6. Information related to other parties involved in the matter, including other property owners, attorneys, adjusters, public adjusters, engineers, buildings consultants, etc. It is requested that the name, firm name, affiliation (party retaining the individual if not an owner), phone number, mailing address, and e-mail address.
7. Copies of any maintenance records or incident reports from the building.
8. If known, Insurance carrier and claim Number.
9. If a fire or vehicle impact, please provide official police or fire department reports (if available).

