



## Property Insurance Claim Documentation

### Insurance Claim Form and Supporting Documents can be sent by:

DocuSign (**Preferred Method**): [Insurance Documentation and AFCU Insurance Claim](#)

E-Mail: [RealEstateServicing@AdditionFi.com](mailto:RealEstateServicing@AdditionFi.com)

Fax: 407-893-5727

Mail: Addition Financial, Attn: Real Estate Servicing, 1000 Primera Blvd, Lake Mary, FL 32746

Include each of the appropriate documents below. Please ensure all pages of the documents are provided and are filled out in their entirety.

### To process the claim, please provide the following documents:

Insurance Claim Check(s) - *(Please include a copy front and back of all checks.)*

Insurance adjuster or contractor's estimate that was approved by the insurance company.

Attorney Release Letter - *(If the claim was handled by an attorney)*

If this is a **monitored** claim, typically a total claim **over \$40,000**, please provide the following in addition to the items listed above

[IRS Form W-9](#), Request for Taxpayer Identification Number - *(To be completed by each contractor)*

Valid Contractor's License - *(The contractor will have the required documents)*

Signed Executed Contract(s) for repairs - *(Signed by each contractor and each homeowner)*

Out-Of-Pocket Expenses & Billing Statements - *(For Reimbursement if repairs have already started)*

Initial Invoice(s) for deposit request to initiate repairs - *(Ex: To order supplies, to retain contractor, etc.)*

### Additional Information Regarding claims under \$40,000:

- Before depositing check(s), all parties who are listed on the check must sign the check.
- Funds must be deposited into the Share Savings Account.
- The check(s) will be placed on hold until all required documents have been provided and reviewed. Once all documents are received, the hold will be released in compliance with the Deposit Availability Policy.



**Additional Information Regarding *Monitored Claims*, typically a total claim *over* \$40,000:**

- Before depositing check(s), all parties who are listed on the check must sign the check.
- Funds must be deposited into a NEW Share Savings Sub-Account titled “Insurance Claim”. Funds will be placed on hold and will be released to pay for repairs upon receipt of appropriate documentation.
- All disbursements must be issued from the Insurance Claim Share Savings Sub-Account.
- The amount of the first draw can be up to \$40,000. Remaining funds will be disbursed based on the repair plan reviewed and approved by Addition Financial.
- If you are making the repairs yourself, the draw will be issued to the named mortgagor(s) on the loan, provided your loan is current and remains current throughout the repair process. If a contractor is being used to complete the repairs, draws will be issued payable to both the contractor(s) and mortgagor(s).
- Once Addition Financial is notified the repairs are completed, an inspection will be ordered for the property. An inspection is ordered for repairs completed by a contractor and for repairs done by the homeowner.
- **FINAL DRAW** - The final draw will be issued from the Insurance Claim Share Savings Sub-Account once our inspector has verified that repairs are 100% complete and we have received the completed [Mortgagor-Contractor Affidavit](#). If completing repairs yourself, ADDITION FINANCIAL must receive copies of all paid receipts.

For additional questions, please contact the Real Estate Servicing Department at 407-893-5072 or 407-896-9411 ext.7812, between 8:00 am and 5:00 pm or E-mail: [RealEstateServicing@AdditionFi.com](mailto:RealEstateServicing@AdditionFi.com)



## AFCU Insurance Claim Form

1. Member Names(s): \_\_\_\_\_ Member Names(s): \_\_\_\_\_

2. Loan Number: \_\_\_\_\_

3. Address of Property Damaged: \_\_\_\_\_

4. Date of Loss: \_\_\_\_\_

5. Type of Loss (i.e. fire, water, hurricane, etc.): \_\_\_\_\_

6. Area(s) Damaged (i.e. roof, ceilings, walls, etc.): \_\_\_\_\_

7. Expected Completion Date of Repairs: \_\_\_\_\_

8. Best Contact Telephone Number: \_\_\_\_\_

9. Email Address: \_\_\_\_\_

10. Total Amount of Claim: \$ \_\_\_\_\_

11. Please list each of the insurance claim check amounts\*

Insurance Claim Check Amount 1: \$ \_\_\_\_\_

Insurance Claim Check Amount 2: \$ \_\_\_\_\_

Insurance Claim Check Amount 3: \$ \_\_\_\_\_

\*Please ensure a copy of each insurance claim check (*front/back*) is included

12. Have any previous insurance checks to repair this damage been received?      Yes      No  
If Yes, amount of check(s): \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

13. Is any additional insurance funds expected for the necessary repairs?      Yes      No  
If Yes, amount expected: \$ \_\_\_\_\_

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**The damage(s) to the above premises (check one):**

Have been repaired

Will be repaired from the proceeds of the check

Mortgagor(s) further acknowledge and understand that any inspections or other supervisory steps taken by ADDITION FINANCIAL are solely conducted on behalf of and for the benefit of ADDITION FINANCIAL. Mortgagor(s) also acknowledge that they have paid or will timely pay all contractors in connection with the making of the repairs outlined herein. Mortgagor(s) further agree to hold ADDITION FINANCIAL harmless against the payment of any monies which may be due for the making of these repairs, and will indemnify ADDITION FINANCIAL against any claims or damages that may arise in connection with the making of the repairs.

Mortgagor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Person(s) Who Is On the Note)

Mortgagor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Person(s) Who Is On the Note)

Episys ID: \_\_\_\_\_ Date: \_\_\_\_\_