



STANDING ROCK SIOUX TRIBE
PROPERTY DEPARTMENT

Property Loss Form

Insured: STANDING ROCK SIOUX TRIBE

Department:	Date/Time of Loss

Insured Location:

Location Address/Name of Location:

Kind of loss (fire, water, theft, flood, wind, hail, lightening, other)

Description of Loss & Damage:

Insured Contact Info

Claim Contact:	Contact Email:
Authorized By:	Contact Phone:

Questions and completed forms should be sent to:
– Email: PROPERTY@STANDINGROCK.ORG
TEL: (701) 854 - 8573