

# NOTICE OF LOSS

Note to Grower: If you have not received your confirmation number within two weeks, please call to inquire.

Name: \_\_\_\_\_

Policy # \_\_\_\_\_ Grower # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell #: ( \_\_\_\_\_ ) \_\_\_\_\_

1. Crops damaged: \_\_\_\_\_

2. Extended coverage (plants damaged): \_\_\_\_\_

3. Cause of damage: \_\_\_\_\_

4. Date damage occurred: \_\_\_\_\_

5. Estimate of damage: \$: \_\_\_\_\_ %: \_\_\_\_\_

6. Permission requested to put insured land to another use: Yes \_\_\_\_\_ No \_\_\_\_\_

7. Location of land where damage occurred:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Remarks:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date Signed

\_\_\_\_\_ Signature of Insured

**For  
Office  
Use  
Only**

Plan: Berries: \_\_\_ Flower Bulbs: \_\_\_ Forage: \_\_\_ Grain: \_\_\_ Grapes: \_\_\_ Tree Fruits: \_\_\_ Vegetables: \_\_\_

NOL Received by: \_\_\_\_\_ Date Received: \_\_\_\_\_

Phone: \_\_\_ Fax: \_\_\_ Mail: \_\_\_ In person: \_\_\_ Email: \_\_\_ Confirmation number: \_\_\_\_\_

**Mail, fax or phone your nearest Production Insurance Office**

**200 - 1690 Powick Road  
Kelowna, BC V1X 7G5  
Ph: (250) 861-7211  
Fax: (250) 861-7490  
1-888-332-3352**

**201 - 9971 - 350<sup>th</sup> Avenue  
PO Box 5000  
Oliver, BC V0H 1T0  
Ph: (250) 498-5250  
Fax: (250) 498-4952  
1-888-812-8811**

**1767 Angus Campbell Road  
Abbotsford, BC V3G 2M3  
Ph: (604) 556-3001  
Fax: (604) 556-3030  
1-888-221-7141**

**162 Oriole Road  
Kamloops, BC V2C 4N7  
Ph: (250) 371-6050  
Fax: (250) 828-4631  
1-888-823-3355**

**4<sup>th</sup> Flr, 1201 - 103<sup>rd</sup> Avenue  
Dawson Creek, BC V1G 4J2  
Ph: (250) 784-2236  
Fax: (250) 784-2299  
1-877-772-2200**

**350 - 10003 - 110<sup>th</sup> Avenue  
Fort St. John, BC V1J 6M7  
Ph: (250) 787-3240  
Fax: (250) 787-3299  
1-888-822-1345**

**Please consult your POLICY WORDING for details regarding Notice of Loss filing.**