

CLAIM SUBMITTAL FORM Instructions: Please fill in the fields below, attach necessary documents if available, and sumbit your claim via one of the following methods: Mail: LTIC Claims c/o Rebecca Hammer P.O. Box 5645 Denver CO 80217 **Email**: rhammer@landtitleinsurancecorporation.com **Part 1: Claimant Information** Last Name: First Name: Date: Address: Email: Phone: Part 2: Statement of Claim **Property Owner: Property Address:** City: County: State: Zip: Explanation for the claim: (use additional sheets if necessary) **Part 3: Supporting Documents** Please attach the following documents if available: **Enclosed?** Copy of Title Insurance Policy Yes No Copy of HUD-1 or Final Settlement Statement Yes No Copy of other supporting documentation, specify in box below: П Yes No