STANDARD SCOPE REPORT

Corporate Office (214) 365-1700
Fax (214)-369-4842

Date

Customer		Salesperson	
Policy Number		Job Number	
Claim Number		Date of Loss	
Insurance Carrier		Inspection Date	
Street Address		Room(s)	
City, ST ZIP		Product(s)	
Phone			

Comments or Special Instructions:

Furniture/Misc. Services