



PROPERTY DAMAGE CLAIM FORM  
DUE TO POWER OUTAGE

**Information About The Claimant:**

*Name, address and contact information*

**First**  **Middle**  **Last**

**Mailing Address**

**City**  **State**

**Zip Code**

**Home Phone Number**

**Work Phone Number**

**Other / Cell Number**

**E-Mail**

**Information About The Incident:**

*When did this incident occur?*

**Month**  **Day**  **Year**

**Time of Day**

*Where did this incident occur?*

**Did the Incident occur at the Address Listed Above?**

If No, Where did the Incident Occur?:

**Street Address or Description of Location**

**City**  **County**

**State**

*Briefly describe  
what happened*

*Describe what was  
damaged and where  
damage can be seen*

**Cost to Repair and/or Replace:**

*Please attach receipts*

**Signature of Claimant**

**Date**

**Please Return Form to:**

**Socorro Electric Cooperative, Inc.**

**P.O. Box H**

**Socorro, NM 87801**

**Attn: Kathy**