

Construction Defect Subrogation Reporting Template

Project Name

Project Address

Date of Loss

Reported By

Contact Information

Insured/Client

Policy Number

Claim Number

Loss Location

Description of Loss/Defect

Date Defect Discovered

Suspected Cause

Estimated Damages

Responsible Parties (e.g., Contractors, Subcontractors, Suppliers)

List of Involved Insurers

Documents Available (check all that apply)

Contracts/Agreements

Invoices

Photos

Inspection Reports

Correspondence

Other

Actions Taken To Date

Additional Notes