

LeVan Asset Management Corporation
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Fort Myers, FL 33919
(239)482-4580
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Incident Report

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| Date of Incident: |
| Time of Incident/Weather Conditions: |
| Location of Incident (include property name): |
| Description of Incident (include cause): |
| Injury or property damage that occurred: |
| Name (First, Middle, Last): |
| Address: |
| City/State/Zip: |
| Telephone Number: |
| Employer name/address/telephone number: |
| Occupation: |
| <small>Any person who, knowingly and with the intent to injure, defraud, or deceive any employer or employee, insurance company, or self-insured program, files a statement of claim containing false or misleading information commits insurance fraud, punishable as provided in s. 817.234, Section 440.105(7), F. S.</small> I have reviewed, understand and acknowledged the above statement. |
| <hr style="width: 50%; display: inline-block; vertical-align: middle; margin-right: 10px;"/> SIGNATURE |
| <hr style="width: 50%; display: inline-block; vertical-align: middle; margin-left: 10px;"/> DATE |