

# CANADIAN CAMPING ASSOCIATION

## PROPERTY AND LIABILITY CLAIMS REPORTING FORM

Claims Adjuster: McKeon and Associates Adjusting Company

Contact: **David McKeon**

Phone: (905) 602-0321

Fax: (905) 602-4025

Cell: (416) 459-2049

Email: [david@maaac.ca](mailto:david@maaac.ca)

Name and Address of Camp:

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Contact Person and Telephone No. at Camp: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Date of Loss, Damage or Injury: \_\_\_\_\_

### **Loss of Your Own Property**

Type of Property Lost, Damaged or Destroyed: \_\_\_\_\_

Type of Damage (i.e., Fire, Windstorm, Theft, Flood, etc.): \_\_\_\_\_

### **Injuries & Damage to Other People or their Property**

Name & Address of Injured Party: \_\_\_\_\_

\_\_\_\_\_

Type of Injury:    Bodily Injury    \_\_\_\_\_    Property Damage    \_\_\_\_\_

Briefly describe to the best of your knowledge how such bodily injury or property damage occurred.

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C.C. Nancy Brown

Firstbrook, Cassie & Anderson    Email: [nbrown@pathcom.com](mailto:nbrown@pathcom.com)

Phone: 1-800-349-8679    Fax: (905) 683-0840