Large Building Property Loss Worksheet

Insured: _____

Date of Loss: _____

Location of Loss: _____

Insured Contacts: (Name/ Phone):

NBSIA Board Member _____

Facilities* _____

Maintenance* _____

Site Supervisor _____

Other (i.e., Purchasing) _____

(*Implementation Team)

ACTION	TARGET DATE	RESPONSIBLE PARTY(S)	STATUS: PENDING/ COMPLETE
ARRANGE DEBRIS REMOVAL • Select Vendor		INSURED/ NBSIA	
ITEMIZE CONTENT/ LOSS		INSURED	
INSURED BOARD APPROVALS • Emergency authorizations		INSURED	
ARCHITECT/ STRUCTURAL ENGINEER CONSULTATION		INSURED	
SCOPE OF REPAIRS OUTLINED		INSURED/ NBSIA	
DSA REQUIRED?		INSURED/ NBSIA	
DEVELOP CONTRACT FOR RECONSTRUCTION		INSURED	
BID PROCESS BEGINS • Vendor(s) approval		INSURED	
REVIEW/ CLARIFY BIDS		INSURED/ NBSIA	
SELECT VENDOR FOR RECONSRUCTION • Contract Executed		INSURED	
OVERSEE RECONSTRUCTION PROJECT		INSURED	
REPLACE CONTENTS		INSURED	

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