

## APPRAISAL REQUEST FORM

Only use this form if you disagree with your amount of loss and you're requesting the formal appraisal process. Not sure? Call 800-788-8247 before filling out this form.

Please sign and date the form below to request an appraisal.

NAME: \_\_\_\_\_

CLAIM NUMBER: \_\_\_\_\_

POLICYHOLDER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

OPTIONAL: Please provide any information you would like us to consider, and what you see as a reasonable outcome of the resolution.

Please return this form to TWIA by mail or email:

**MAIL**

Attn. Appraisal Request  
P.O. Box 99090  
Austin, TX 78709-9090

**EMAIL**

claims@twia.org

**Texas Windstorm Insurance Association**

PO Box 99090 Austin, TX 78709-9090  
(800) 788-8247 | [www.twia.org](http://www.twia.org)