

**CHAMPLAIN TOWERS COLLAPSE**  
**NON-OWNER (TENANT, OCCUPANT)**  
**PERSONAL PROPERTY/CONTENTS**  
**SIMPLE CLAIM FORM**

On June 24, 2021, the Champlain Towers South Condominium building (“CTS”) collapsed. The collapse resulted in many deaths, injuries to many survivors and destroyed a large number of Units, along with their contents (the “CTS Collapse”).

The Court has already granted Final Approval to a Settlement between the Economic Loss Class Members (i.e., Unit Owners) and the Receiver. Included in that Settlement was a resolution of any and all claims by Unit Owners for their lost contents.

The purpose of this Claim Form is to provide all Economic Loss Class Members who **were not Unit Owners** (i.e. renters, tenants, etc.), the opportunity to receive compensation, specifically for the **loss of personal property and/or Unit contents**, as a result of the collapse.

If You agree to complete this Claim Form, and can answer “Yes” **to 1**, and **2 or 3**, each **Unit** will be entitled to a direct payment of \$10,000 (for guests, short term tenants, etc.) or \$50,000 (for “primary residents”) from the CTS Receivership Estate. Multiple occupants may not file separate claims utilizing this form but must share this total compensation. The Court has already appointed **Rachel Furst (e-mail: [rwf@grossmanroth.com](mailto:rwf@grossmanroth.com))** and/or **Curtis Miner (e-mail: [curt@colson.com](mailto:curt@colson.com))**, who can help in arranging an attorney to assist at no charge to you. You must complete and return this Form to **Receiver**

**Michael Goldberg by July 18, 2022,** by emailing it to:  
[CTSReceivership@akerman.com](mailto:CTSReceivership@akerman.com) .

Instead of completing this Simple Claim Form, **you may decide to complete the full CTS Personal Property / Unit Contents Claim Form**, thereby **knowingly and voluntarily waving** any rights to this flat payment of \$10,000 or \$50,000, but You will be required to present supporting evidence for your alleged Property Loss Claim. The Court will evaluate Your claim and determine: (a) whether you are entitled to a claim under the laws of State of Florida, and (b) the appropriate amount of such claim. While there is no guarantee of ***any*** payment through submitting to this alternate process, that payment could potentially ***exceed*** \$10,000 or \$50,000, depending on the results of the evaluation process.

**SECTION 1: CLAIMANT INFORMATION**

**Full Name:**

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**(First)**

**(Middle)**

**(Last)**

**Unit Number:**

**Primary Telephone Number:**

**Current Mailing Address:**

**Email Address:**

**SECTION 2:**

**DECLARATIONS**

1. I was residing at, and/or present at CTS on June 24, 2021 and **did not** have any ownership of the Unit.

\_\_\_\_\_ **Yes**

**AND**

2. The Unit was my “primary residence” at time of CTS Collapse (and thus entitled to \$50,000 for damaged personal property)

\_\_\_\_\_ **Yes**

**OR**

3. The Unit was not my “primary residence” at time of CTS Collapse (and thus entitled to \$10,000 for damaged personal property)

\_\_\_\_\_ **Yes**



**SECTION 3:**  
**CLAIMANT CERTIFICATION**

I declare, **under penalty of perjury**, that the foregoing responses are true and correct.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_