



NOTICE OF CLAIM

For Official Use Only:

Notice of Claim received
by: _____

Date: _____

Time: _____

THE UNDERSIGNED SUBMITS THE FOLLOWING INFORMATION AND MAKES CLAIM AGAINST THE

CITY OF DOUGLAS, AND/OR EMPLOYEE _____, AS FOLLOWS:

CLAIMANT INFORMATION

CLAIMANT NAME: _____

ADDRESS: _____

HOME TELEPHONE: _____ WORK TELEPHONE: _____

OCCURRENCE OF EVENTS GIVING RISE TO THE CLAIM

DATE OF INCIDENT: _____ TIME: _____

LOCATION OF INCIDENT: _____

GIVE SPECIFICS OF THE INCIDENT, EVENT, OCCURRENCE, ACT OR OMISSION THAT YOU CLAIM

CAUSED YOUR INJURY OR DAMAGE: _____

DESCRIBE HOW OR WHY YOU BELIEVE THE CITY OF DOUGLAS OR EMPLOYEE WAS AT FAULT:

IF THIS WAS A VEHICLE ACCIDENT, STATE WHAT ROAD OR HIGHWAY THE ACCIDENT OCCURRED ON

YOUR VEHICLE LICENSE NUMBER: _____

YEAR _____ MAKE _____ MODEL _____

THE LICENSE OF THE CITY OF DOUGLAS VEHICLE: _____

NAME OF THE CITY OF DOUGLAS DRIVER: _____

WAS A POLICE REPORT FILED? _____ YES _____ NO _____ DON'T KNOW

POLICE AGENCY INVOLVED _____

DESCRIPTION OF PROPERTY DAMAGE AND INJURIES:

DESCRIBE YOUR PROPERTY THAT WAS DAMAGED _____

DOLLAR AMOUNT OF PROPERTY DAMAGE CLAIMED \$ _____

DESCRIBE THE PERSONAL INJURIES SUFFERED _____

DOLLAR AMOUNT OF PERSONAL INJURIES SUFFERED \$ _____

(ATTACH RECEIPTS, OR OTHER DOCUMENTATION OF THE AMOUNTS CLAIMED. ATTACH MEDICAL REPORTS WHERE AVAILABLE.)

TOTAL DAMAGE CLAIMED \$ _____

WITNESSES:

LIST ALL WITNESSES, WITH THEIR NAME, ADDRESS AND PHONE _____

ADDITIONAL COMMENTS OR DETAILS:

BY SIGNING, YOU VERIFY THAT THE INFORMATION PRESENTED IN THIS CLAIM IS TRUE TO THE BEST OF YOUR KNOWLEDGE AND BELIEF.

SIGNATURE _____ DATE _____

This form is provided to assist in presenting a claim to the City of Douglas and complies with the requirements of A.R.S. § 12-821.01, which defines the requirements for filing a claim against a public entity in the State of Arizona. It is important to complete all applicable items on the form in order to assure compliance with state law. Failure to do so may result in your claim being rejected. Filing a valid claim will always remain your sole responsibility. If your claim is contractual in nature, refer to the guidelines set forth in A.R.S. § 11-622.

The accompanying letter also contains the name and address of the person authorized to accept service of the notice of claim form. It is your responsibility to identify the correct person, entity and/or entities against which your claim is being made, and file the notice of claim with them as required by A.R.S. § 12-821.01. You can mail the completed form.

If you have questions about this form or your claim it is your responsibility to seek legal advice on your own and at your expense. Please do not call or otherwise contact any employees of the City of Douglas or any employee of its officers, boards or departments, to seek assistance with filing a notice of claim or seek any other assistance with respect to your claim. No officer or employee of the City of Douglas is authorized to provide legal advice or assistance with the preparation or filing of your claim. If you rely on any information furnished directly or indirectly by any officer or employee of the City of Douglas you do so at your own risk.

TO WHOM IT MAY CONCERN:

Complete all items on the Claim Form and return by mail or hand delivery to:

Brenda Aguilar
City Clerk
City of Douglas
425 10th St.
Douglas, AZ 85607

Failure to follow the above instructions will result in improper service, which could result in a delay of processing your claim.

Arizona Revised Statute § 12-821.01, provide certain requirements with regard to presenting claims and filing lawsuits against public entities and public employees. The statute requires, in part, that a claim against a public entity or public employees.

- be filed **with the appropriate party within 180 days after the cause of action accrues**,
- contain sufficient facts to permit the public entity or public employee to understand the basis upon which liability is claimed and,
- contain a specific dollar amount for which the claim can be settled and the facts supporting that amount.

Failure to comply with the requirements of the statute will result in your claim being rejected. Filing a valid claim is your sole responsibility. If your claim is contractual in nature, refer to the guidelines set forth in A.R.S. § 11-622.

Once we receive your completed claim form, your claim will be investigated. In addition to the required information, please provide copies of any documents that would support your claim (i.e. estimates, bills, police report, etc.) so that the City of Douglas can determine liability and either pay or deny your claim. If the City of Douglas does not respond to your notice of Claim within 60 days you may consider the claim denied.

Please be aware that you legally responsible for taking steps to minimize any loss sustained and to protect property from further damage. It is important that all information requested on the claim form be provided so that a prompt and fair evaluation can be made of your claim.

In order to file a lawsuit against a public entity or employee, under state law, it is required that a proper claim first be filed. A claim will be barred by the statute of limitations if a lawsuit is not filed within **one year** after the cause of action accrues. (A.R.S. § 12-821) Failure to file a proper and timely claim or lawsuit will result in the dismissal of your action.