

TOWN OF GLOCESTER

NOTICE OF CLAIM

1. A. CLAIMANT NAME & ADDRESS:

B. NAME & ADDRESS OF PROPERTY OWNERS (S) IF DIFFERENT THAN ABOVE:

2. DESCRIBE CLAIM IN DETAIL:

3. WHEN ACCIDENT INVOLVED, PROVIDE THE FOLLOWING:

A. DATE AND TIME: _____

B. LOCATION: _____

C. DESCRIPTION, INCLUDING DIAGRAM: _____

4. A. NAME & ADDRESSES OF WITNESSES:

B. DESCRIBE INJURIES TO SELF:

C. NAME & ADDRESS OF OTHER INJURED:

D. DESCRIBE PROPERTY DAMAGES FOR WHICH CLAIM IS BEING MADE:

5. ATTACH PHOTOS OF ACCIDENT AND/OR DAMAGED PROPERTY, IF AVAILABLE.

ATTACH COPY OF POLICE REPORT

ATTACH THREE (3) WRITTEN ESTIMATES OF REPAIR FROM REPUTABLE SERVICEMEN

ATTACH ANY OTHER PERTINENT DOCUMENTATION.

SIGNATURE: _____

DATE: _____