CLAIM FOR DAMAGES AGAINST THE CITY OF VALLEJO, CALIFORNIA (GOVT. CODE §910, 910.2 & 910.4



TO: CITY CLERK CITY OF VALLEJO, CITY HALL 555 SANTA CLARA STREET, 3RD FLOOR VALLEJO, CA 94590

Date & Time Filed with City Clerk [City Use Only]

CLAIMANT HEREBY PRESENTS THE FOLLOWING CLAIM FOR DAMAGES:

1.	Claimant's Name:				
2.	Claimant's Address:Zip Code				
3.	Claimant's Telephone No. () Date of Birth				
4.	Date of Incident / Accident / Arrest:				
5.	Date of injuries, damages, or losses were discovered:				
6.	Location of Incident / Accident / Arrest:				
7.	What did City or employee(s) do to cause this loss, damage, or injury?				
8.	What are the name(s) of the City's employee(s) who caused this injury, damage, or loss (if known)?				
9.	What specific injuries, damages, or losses did Claimant sustain?				
10.	What amount of money is Claimant seeking, or the appropriate court of jurisdiction (see reverse)?				
10.	what amount of money is Claimant Seeking, of the appropriate court of jurisdiction (see reverse)?				
11.	How was this amount calculated? (If applicable, please itemize.)				
12.	Names, addresses, and telephone numbers of witnesses, doctors, hospitals, and any person who can substantiate your claim or the amount claimed:				
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13.	Any additional information that you believe might be helpful in considering this claim:				
14.	All notices and communications with regard to this claim should be directed to (only to be completed if different than Claimant's address and phone number at Questions 2 and 3 above):				
	Name:		Relationship		
	Address		City	Zip Code	
	Daytime Telephone No: ()				
15.	DATE:	SIGNATURE:			
insuffi	cient. If you have any que		this form, please	o do so may result in your claim being found e contact the Risk Management Division at r own lawyer.	
thousinjury, compl be inc	and dollars (\$10,000) as of damage, or loss, insofar utation of the amount clain lluded in the claim. Howey	of the date of presentation of the as it may be known at the time med. If the amount claimed exc	ne claim, including of the presental edge of the presental edge ten thousand diction over the second or the second edge of the	w the amount claimed if it totals less than ten g the estimated amount of any prospective tion of the claim, together with the basis of nd dollars (\$10,000), no dollar amount shall claim would rest in municipal court (\$25,000	
INTE		RIME PUNISHABLE AS A FELC		LSE OR FRAUDULENT CLAIM, WITH LIFORNIA PENAL CODE, SECTION 72,	

Updated 10/20/15 J:\CLAIMS\Claims Templates\Claim Form 10.20.15.docx