NOTICE OF TORT CLAIM

TO:
City/Municipal Clerk's Office
[Name of Municipality]
[Street Address]
[City, State, Zip Code]

FROM (Claimant):
[Your Full Name]
[Your Address]
[Your Phone Number]
[Your Email Address]

DATE OF INCIDENT: [Date]

TIME OF INCIDENT: [Time]

LOCATION OF INCIDENT: [Specific Address, Intersection, or Landmark]

DESCRIPTION OF THE INCIDENT:
[Provide a detailed description of how the incident occurred. Describe the specific condition or action that caused the injury or damage.]

ALLEGATION OF NEGLIGENCE:
[Describe why the municipality is responsible. For example: failure to maintain a sidewalk, failure to repair a pothole, or negligent operation of a city vehicle.]

DESCRIPTION OF INJURIES OR DAMAGES:
[List all physical injuries sustained and/or property damage incurred.]

WITNESSES (if any):
[Name and contact information for any witnesses]

AMOUNT OF DAMAGES CLAIMED:
Estimated Total: $[Dollar Amount]
[Breakdown of costs: Medical bills, repair estimates, lost wages, etc.]

SIGNATURE:

_____
[Your Printed Name]
Date: [Today's Date]

CERTIFICATE OF SERVICE:
I hereby certify that a copy of this notice was delivered via [Certified Mail/Hand Delivery] on [Date].