



Claim Presented To The City of King

PLEASE READ THE INSTRUCTIONS ON THE BACK BEFORE COMPLETING.

1. Claimant's Name (please print) _____ Claim No. _____
Claimant's Address: _____
Day Phone: _____ Evening Phone: _____
2. Type of claim (check all that apply): This claim arises from: Personal injury Wrongful death
 Property damage Crop damage Breach of contract Tax refund Employment Other
3. When did the damage or injury occur? (date and time) _____ King City Police Report No. _____

4. Where did the damage occur? (Address or Physical description)

5. What happened and why do you think the City is responsible? (attach additional page(s) if necessary)

6. Where there any witnesses to this occurrence? (Please provide names, addresses & phone numbers)

7. If applicable, identify the name and position of the responsible City employee(s), if known:

8. What damage or injury occurred? _____
9. Claim Amount:
Is the amount claimed \$10,000 or less? If so, specify amount here \$: _____
Is the amount between \$10,000 and \$25,000? If so, check this box: Superior Court Limited Jurisdiction
Is the amount claimed over \$25,000? If so, check this box: Superior Court Unlimited Jurisdiction
10. How did you calculate the amount claimed? (please attach documentation)

11. I declare under penalty of perjury under the laws of the State of California that the foregoing information is true and correct, and that this declaration was executed on

_____, California
(Signature of Claimant) (Date) (Place where executed)

If claimant is a minor at the time this claim is made, a parent or legal guardian must also sign below

(Print name and relationship to claimant) (Signature)

OFFICIAL NOTICE AND CORRESPONDENCE

If represented by an insurance company or an attorney, please provide the information requested below

Name: _____ Address: _____ Day Phone: _____