



CITY OF PETALUMA

POST OFFICE BOX 61
PETALUMA, CA 94953-0061

Teresa Barrett
Mayor

D'Lynda Fischer
Mike Healy
Gabe Kearney
Dave King
Kevin McDonnell
Kathy Miller
Councilmembers

CLAIM FORM

Claims for death, injury to person or to personal property must be filed not later than six months after the occurrence. All other claims for damages must be filed not later than one year after the occurrence. (Government Code section 911.2.)

The undersigned hereby presents the following claim against the City of Petaluma in accordance with the provisions of Government Code section 910, et seq.

1. **NAME OF CLAIMANT:** _____ **DATE:** _____

CLAIMANT'S ADDRESS: _____

CITY: _____ **ZIP:** _____

PHONE: _____

E-MAIL: _____

2. **MAILING ADDRESS:** _____

CITY: _____ **ZIP:** _____

3. **DATE OF INCIDENT:** _____ **TIME OF INCIDENT:** _____

LOCATION OF INCIDENT: _____

4. **DESCRIPTION OF THE INCIDENT OR ACCIDENT:**

(Include your reason(s) for believing that the City is liable for your loss(es):

5. **DESCRIPTION OF ALL INJURIES OR DAMAGES WHICH YOU BELIEVE YOU HAVE INCURRED AS A RESULT OF THE INCIDENT:**

City Clerk
11 English Street
Petaluma, CA 94952

Phone (707) 778-4360
Fax (707) 778-4554

E-Mail:
cityclerk@ci.petaluma.ca.us

6. NAME(S) OF ANY CITY EMPLOYEE(S) CAUSING THE DAMAGES THAT YOU ARE CLAIMING, IF KNOWN:

7. DOLLAR AMOUNT OF ALL DAMAGES YOU ARE CLAIMING IF LESS THAN \$10,000:
(Attach all estimates that are available)

8. IF DOLLAR AMOUNT OF ALL DAMAGES IS GREATER THAN \$10,000, PLEASE INDICATE :

- Case would be limited (less than \$25,000)
- Case would be unlimited (greater than \$25,000)

9. IF CLAIM IS FOR INDEMNITY, ON WHAT DATE WERE YOU SERVED WITH THE UNDERLYING LAWSUIT:

- PRESENTATION OF A FALSE CLAIM WITH AN INTENT TO DEFRAUD IS A FELONY (PENAL CODE SECTION 72).
- CLAIMS ARE SUBJECT TO DISCLOSURE UNDER GOVERNMENT CODE SECTION 6250 ET SEQ. (POWAY UNIFIED SCHOOL DISTRICT V. SUPERIOR COURT) (1998) 62 CAL. APP. 4TH 1496.

SIGNATURE OF CLAIMANT: _____

PRINT NAME: _____ DATE: _____

RETURN COMPLETED FORM TO:

OFFICE OF THE CITY CLERK
CITY OF PETALUMA
11 ENGLISH STREET
PETALUMA, CA 94952

MAIL FORM TO:

OFFICE OF THE CITY CLERK
CITY OF PETALUMA
POST OFFICE BOX 61
PETALUMA, CA 94952