

NOTICE OF CLAIM

To file a claim against the CITY OF DENISON, you must submit the first page of this form to the CITY OF DENISON, CITY ATTORNEY'S OFFICE, PO Box 347, Denison, TX 75020. You may submit the form in person, by mail, by email to cwallentine@cityofdenison.com, or by fax to 903-465-4828. Questions? Call the legal department, 903-465-2720 x2443.

Claimant Information					
Name:					
Mailing Address:					
Home Phone:		Cell Phone:		Work Phone:	
Email Address:					
Claim Information					
Date of Occurrence:		Time of Occurrence:			
Location of Occurrence:					
Damage Estimate:		Is estimate based on bids for repair or receipts? (<i>check box</i>)	Yes		No
Describe Occurrence:	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>				
Vehicle Information:	Year:		Make:		Model:
Witness Information					
Name	Address	Phone	Email		
Injuries					
Describe Injuries, if any:	<hr/> <hr/> <hr/>				
Insurance information					
Insurance Carrier:		Address:			
Policy Number:		Phone Number:			

The City of Denison is hereby given notice pursuant to Section 10.07 of the City Charter of this claim for damages.

Claimant's Signature

Date

City of Denison

City Charter

Article X, Section 10.07 Tort Liability

Before the City shall be liable for damages for the death or personal injuries of any person or for damages to, or destruction of property of any kind, which does not constitute a taking or damaging of property under Article 1, Section 17, Constitution of the State of Texas, the person injured, if living, or his/her representatives, if deceased, or the parent or guardian of a minor child, or the owner, his/her agent or attorney of the property damaged or destroyed, shall give the City Manager notice in writing of such death, injury, damage, or destruction, duly verified by affidavit, within thirty (30) days after same has been sustained, stating specifically in such written notice when, where, and how much the death, injury, damage or destruction occurred, and the apparent extent of any such injury, the amount of damages sustained, the actual residence of the claimant by street and number at the date the claim is presented, the actual residence of such claimant for six (6) months immediately preceding the occurrence of such death, injury, damage, or destruction, and the names and addresses of all witnesses upon whom it is relied to establish the claim for damages. The failure to so notify the City Manager within the time and manner specified herein shall exonerate, excuse, and exempt the City for liability whatsoever. No act of any officer or employee of the City shall waive compliance, or stop the City from requiring compliance, with the provisions of this Section as to notice.