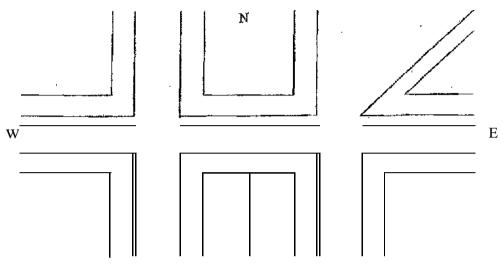


CITY OF RIVIERA BEACH CLAIM FORM

(DAMAGE TO AUTO / PROPERTYDAMAGE)

1.	CLAIMANT'S NAME:					
	(Print Last, Fi	rst Middle)				
2.	Street Address :					
3.	Telephone Number :					
4.	Full Name of Insurance Company:			-		
5.	Name of Policy Holder:					
6.	Policy#			·		
7.	Vehicle Make:	Model:	Year:			
8.	License Plate #					
9.	Date & Time of Accident:					
10. Location at which Accident Occurred:						
11.	Name of Witness to Accident:					
12.	Witness Telephone Number:					
13.	Written Estimate attached: Yes:	No:	Pictures : Yes	No:		
14.	Paid Bill Attached: Yes:	No:	-			
15.	Signature:	Date:				

defect or place of injuries, resulting from defects only, Please fill in the following information as completely as possible and include landmarks. Failure to provide this information may delay the adjudication of your claim. The city investigator will use this description to inspect the alleged defects or place of injuries.



(Include Street Avenue or blv/ number or name of closest intersecting streets or landmarks)

Describe in detail the nature of the incident or injuries (Use a supplementary sheet if necessary).

How to Submit Your Claim

Once you have assembled your claim (i.e. completed claim form plus all relevant materials noted above) either mail it or hand deliver it to the office of Human Resources/Risk Management Division:

Human Resources/ Risk Management Division 1481 W 15th Street Riviera Beach, Florida 33404 Tel: 561-840-4880 sshields@rivierabeach.org

Please follow the procedures listed below to file a Claim with the City of Riviera Beach . If you incurred damages or injuries caused by roadway defects, sidewalk defects or potholes within the City's geographical limits, or are seeking reimbursement from damages incurred as a result of a collision with a vehicle owned or leased by the City, you must complete the attached Notice of Claim Form.

Your claim must include the following items:

- a. Detailed explanation of damages or injuries suffered.
- b. Exact time and location of incident.
- c. Date of Incident
- d. Location where incident occurred

Items that may be included with your claim:

- a. Itemized estimate of damages and/or receipts.
- b. Copy of Police Report if applicable.
- c. Pictures, color if possible
- d. Copy of Medical Bills for personal injuries.
- e. If estimate of repairs is over \$500, three estimates is required.

^{*}All claims for sidewalk, roadway or pothole incidents MUST be filed within ten (10) days of the date of the incident.

^{*}Please allow 6 to 8 weeks processing time before inquiring about your claim"