



NOTICE OF TORT CLAIM

IMPORTANT NOTICE: *To be valid your claim must be submitted to the City Clerk within one year from the date of the incident. It will then be sent to the City's insurance agent for investigation. You may expect them to contact you. Other limitations to your claim may apply (See Oklahoma Statutes Title 51, Section 151-172).*

Claimant's Name: _____ Amt. of Claim \$ _____

Address _____

E-mail address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Claimants SSN: _____

Claimant's DOB: _____

For this section, continue on another sheet, if needed for any information requested.

1. Date of Incident: _____

2. Place of Incident: _____

3. Cause of incident:

4. How did the incident occur?

5. List all persons and/or property for which you are claiming damages:

a. _____ \$ _____

b. _____ \$ _____

c. _____ \$ _____

d. _____ \$ _____

Please attach all estimates, bills or other information to support the amount of your claim.