## CLAIM #

## GENERAL LIABILITY AFFIDAVIT OF CLAIM

Jefferson County, Alabama Risk Management Division, Room 270 716 Richard Arrington, Jr. Blvd. N Birmingham, Alabama 35203

| Claimant's Name:  | Home Phone:                         |                                   |  |
|---|-------------------------------------|-----------------------------------|--|
| Address: Street   | 0:4-                                | Zip Code                          |  |
| Street  | City                                | Zip Code                          |  |
| Place of Employment:  | Work Phone:                         |                                   |  |
| Last 4 Digits of Social Security Number:  | Date of Birth                       | :                                 |  |
| Tax Identification Number (If Applicable):  |                                     |                                   |  |
| Date of Incident:   | Time of Incident                    | :                                 |  |
| Location of Incident (If Different from Address Listed Above):  |                                     |                                   |  |
| Details of Incident and Why You Believe the County is Liable:   |                                     |                                   |  |
| Details of Injury (If Applicable) or Property Damage:   |                                     |                                   |  |
| State the <b>amount of your claim in dollars</b> and attach supporting  | ng estimates, lists, etc: <b>\$</b> |                                   |  |
| I have submitted a separate itemization of damaged claimer<br>1975, and I hereby swear under a penalty of perjury that the<br>true, correct and complete. |                                     |                                   |  |
|   |                                     | Affiant – Claimant<br>(Signature) |  |
|   |                                     |                                   |  |
| Sworn to and subscribed to me on this day of  | , 20                                |                                   |  |

(Notary Public)

My Commission Expires:

SEAL