



CITY OF HARTFORD
NOTICE OF INJURY/DAMAGE

Return to: Town Clerk of the City of Hartford, 550 Main Street, Hartford, CT 06103

I, _____ of _____
(Name) (Street, Town and Zip Code)

Date of Birth _____ Sex _____ Social Security Number _____

Telephone Number _____ (Work) _____ Cellular _____

Hereby give notice that on the _____ day of _____, 20____, at _____ o'clock A.M. / P.M.

I sustained the following injury or property damage; describe all injuries and property damage fully:

Amount of property damage/medical: \$ _____ (Attach bills)

Witness: Name and Address _____

Police at Scene: ____ Yes ____ No Officer's Name _____

The place was (describe location of defect as accurately as possible, including which side of the street, how far from the curb or edge of road, if no curbing, and locating the defect in distance and direction from the nearest adjoining property-house number, intersecting street, pole with number, etc.)

The defect consisted of (state accurately the nature and dimensions of the defect, such as ice or snow or both, a hole, an obstruction, broken or raised flag walk, etc.)

The weather was _____.

IMPORTANT: AN ACCURATE DESCRIPTION OF THE DEFECT, ITS LOCATION AND YOUR INJURY IS NECESSARY FOR A SUFFICIENT NOTICE TO THE CITY.

To the best of your knowledge, how long has the defect existed prior to your injury?

What direction were you traveling? _____

Had you travel over this place before in the same direction? _____

Were you treated by a doctor? ____ Yes ____ No

Doctor's Name _____

Were you under any doctor's care prior to this injury? ____ Yes ____ No

If yes, what were you being treated for?

I hereby authorize the City of Hartford to receive medical, hospital and wage reports concerning this claim.

Dated at Hartford, Connecticut, this _____ day of _____, 20____.

Signed _____

[illegible]

Date