

NAVAJO COUNTY

CLAIM FORM

FOR DAMAGES TO PERSONS OR PERSONAL PROPERTY

File with: The Board of Supervisors within Navajo County – PO BOX 668, Holbrook, AZ 86025 and/or involved employee(s).

I/We, the undersigned, submit the following claim and information relative to damage to persons and/or personal property:

1. CLAIMANT(S) NAME: _____
 - a. ADDRESS: Street: _____
City: _____ State: _____ Zip Code: _____
 - b. PHONE NO.: _____ c. CELL NO.: _____
 - d. DATE OF BIRTH: _____ e. SSN # _____
 - f. DRIVERS' LIC. NO.: _____ g. STATE OF ISSUE: _____
2. Name, telephone or post office address to which claimant desires notices be sent (if other than above):

3. Occurrence or event from which the claim arises:
 - a. DATE: _____ b. TIME: _____ c. PLACE: (exact and specific location or address): _____
 - d. Specify the particular occurrence, event, act, omission or County employee(s) you claim caused the injury or damage (attach additional pages as necessary):

 - e. State the legal basis wherein the County of Navajo or its employee(s) was/were at fault:

4. Provide a complete description of the bodily or personal injury, so far as is known at the time of his/her claim. If there were no injuries, state "no injuries" (attach additional pages as necessary):

5. Provide the description and extent of property damage (attach additional pages as necessary):

6. Name(s) and address(es) of any other person(s) injured: _____

7. Amount of damages claimed:
- 1) Property damage (attach receipts, invoices, estimates) \$ _____
- 2) Medical expense (attach bills and records) \$ _____
- 3) Other – Please specify (attach bills, receipts, etc.) \$ _____
- Total amount claimed:** \$ _____
- (If you are claiming multiple items, please attach a separate sheet with an itemization of all expenses claimed.)*
8. Names, addresses and telephone numbers of all witnesses, etc.:
- a. _____
- b. _____
- c. _____
9. Any additional information that might be helpful in evaluating this claim: _____
- _____
- _____
10. If available, please provide photographs. Provided? YES _____ NO _____
11. Please provide bills, records, receipts, estimates and/or invoices. Provided? YES _____ NO _____
12. Please state the specific amount for which the claim(s) can be settled at this time. \$ _____

ALL CLAIMS MUST COMPLY WITH A.R.S. § 12-821.01, ET SEQ., AND MUST BE FILED WITHIN 180 DAYS AFTER THE CAUSE OF ACTION ACCRUES. BY PROVIDING THIS CLAIM FORM, OR ENTERING INTO ANY DISCUSSIONS OR NEGOTIATIONS WITH THE COUNTY OF NAVAJO DOES NOT WAIVE ANY OF ITS DEFENSES PURSUANT TO A.R.S. § 12-821.01, ET SEQ., OR ANY OTHER LAW. IF YOU ARE UNSURE ABOUT YOUR LEGAL OBLIGATIONS, CONSULT A LAWYER.

THIS FORM IS OFFERED BY THE COUNTY OF NAVAJO FOR CONVENIENCE PURPOSES ONLY –THE CLAIMANT(S) REMAINS(S) SOLELY RESPONSIBLE TO INSURE COMPLIANCE WITH STATE LAW. YOU ARE CAUTIONED THAT YOU MUST PROVIDE SUFFICIENT FACTS FOR THE COUNTY TO UNDERSTAND THE BASIS UPON WHICH LIABILITY IS CLAIMED AND THE FACTS SUPPORTING THE AMOUNT FOR WHICH YOU STATE THE CLAIM CAN BE SETTLED.

I have read the matters and statements made in the above claim and I know the same to be true of my own knowledge, except as to those matters stated upon information and belief and, as to such matters, I believe the same to be true. I certify under penalty of perjury that the foregoing is TRUE and CORRECT.

Signed this _____ day of _____, 20_____.

CLAIMANT SIGNATURE

WARNING!!
IT IS A CRIMINAL OFFENSE TO FILE A FALSE CLAIM
(Penal Code A.R.S. § 13-2311 – Insurance Code 44-1220)

File with: The Board of Supervisors within Navajo County – PO BOX 668, Holbrook, AZ 86025 and/or involved employee(s).

12-821.01. Authorization of claim against public entity or public employee

A. Persons who have claims against a public entity or a public employee shall file claims with the person or persons authorized to accept service for the public entity or public employee as set forth in the Arizona rules of civil procedure within one hundred eighty days after the cause of action accrues. The claim shall contain facts sufficient to permit the public entity or public employee to understand the basis on which liability is claimed. The claim shall also contain a specific amount for which the claim can be settled and the facts supporting that amount. Any claim that is not filed within one hundred eighty days after the cause of action accrues is barred and no action may be maintained thereon.

B. For the purposes of this section, a cause of action accrues when the damaged party realizes he or she has been damaged and knows or reasonably should know the cause, source, act, event, instrumentality or condition that caused or contributed to the damage.

C. Notwithstanding subsection A, any claim that must be submitted to a binding or nonbinding dispute resolution process or an administrative claims process or review process pursuant to a statute, ordinance, resolution, administrative or governmental rule or regulation, or contractual term shall not accrue for the purposes of this section until all such procedures, processes or remedies have been exhausted. The time in which to give notice of a potential claim and to sue on the claim shall run from the date on which a final decision or notice of disposition is issued in an alternative dispute resolution procedure, administrative claim process or review process. This subsection does not prevent the parties to any contract from agreeing to extend the time for filing such notice of claim.

D. Notwithstanding subsection A, a minor or an insane or incompetent person may file a claim within one hundred eighty days after the disability ceases.

E. A claim against a public entity or public employee filed pursuant to this section is deemed denied sixty days after the filing of the claim unless the claimant is advised of the denial in writing before the expiration of sixty days.

F. This section applies to all causes of action that accrue on or after July 17, 1994.

G. If a genuine issue of material fact exists as to whether the requirements of this section have been complied with, the issue shall be resolved before a trial on the merits and at the earliest possible time.

H. This section does not apply to any claim for just compensation pursuant to chapter 8, article 2.1 of this title.