

**AFFIDAVIT OF CLAIM**

Jefferson County, Alabama

Risk Management Coordination, Room A610

716 Richard Arrington Jr. Blvd N

Birmingham, Alabama 35203

Claimant's name: \_\_\_\_\_ Home phone: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

Zip

Place of employment: \_\_\_\_\_ Work phone: \_\_\_\_\_

Social Security number: \_\_\_\_\_ Driver's license number: \_\_\_\_\_

Tax Identification number: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Sex: \_\_\_\_\_

Date of incident: \_\_\_\_\_

Time: \_\_\_\_\_

Location of incident (be specific) \_\_\_\_\_

Name of County employee and vehicle or equipment involved: \_\_\_\_\_

Details of Incident and why you believe the County is liable: \_\_\_\_\_

Details of injury or property damage: \_\_\_\_\_

was incident reported to the police? \_\_\_\_\_ Report number: \_\_\_\_\_

State the **amount of your claim** in dollars and attach supporting estimates, lists, etc: \$ \_\_\_\_\_

I have submitted a separate itemization of damage claimed, as required by Title 11-12-5, Code of Alabama, 1975, and I hereby swear under a penalty of perjury that the above statements and attachment(s) hereto are true, correct and complete.

*Affiant-Claimant*

*(Signature)*

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 2007

*(Notary Public)*

*My Commission expires:*

Seal