

CLAIM AGAINST THE CITY OF SAN DIEGO (FOR DAMAGES TO PERSONS OR PERSONAL PROPERTY)

Present claim by personal delivery or mail to the City of San Diego, Risk Management Dept., 1200 Third Ave., Suite 1000, San Diego, CA 92101.

Recei	ved via	: TIME STAMP	
то тн	HE HON	IORABLE MAYOR AND CITY COUNCIL, the City of San Diego, California	
		, hereby make a claim against the City of San Diego and make the tements in support of the claim:	
1.	CLAI	IMANT INFORMATION	
	a.	Claimant's Name:	
	b.	Post Office Address of Claimant:	
		(CITY) (STATE) (ZIP)	
	C.	Claimant's Home Phone No.:	
	d.	Claimant's Business Phone No.:	
	e.	Post Office address to which the person presenting the claim desires notices to be sent, if different than above:	
	f.	Social Security No.:	
	g.	Date of Birth:	
	h.	Driver's License No.:	
2.	CIRCUMSTANCES GIVING RISE TO THE CLAIM		
	a.	Date of the occurrence or transaction which gave rise to the claim:	
	b.	Time of the occurrence or transaction which gave rise to the claim:	
	C.	Place of occurrence or transaction (please be specific):	

	d.	Other circumstances of the occurrence or transaction giving rise to the claim:	
3.	DESC	RIPTION OF CLAIM	
	a.	General description of the indebtedness, obligation, injury, damage or loss incurred:	
	b.	The name or names of the public employee or employees causing the claimant's injury, damage, or loss, if known, are:	
	C.	Damages [please choose one]:	
		☐ The amount claimed is less than \$10,000.	
		The amount of the claim as of the date of this claim is \$ This figure is based on the following:	
		☐ The amount claimed is more than \$10,000.	
		Please state if the claim would be a limited civil case ¹ .	
	d.	Please provide any additional information that might be helpful in considering your claim, including names of witnesses, treating physicians, and hospitals:	
	e.	Please attach and/or provide any additional information that may be helpful in considering your claim including proof of damages such as invoices, receipts, and estimates.	
WARI	NING:	It is a criminal offense to file a false claim (Cal. Penal Code § 72).	
own k	nowledg	ne matters and statements made in the above claim and I know the same to be true of my ge, except as to those matters stated upon information or belief and as to such matters, I me to be true. I certify under penalty of perjury that the foregoing is true and correct.	
Dated	:	Signature of Claimant or Person Acting On Behalf of Claimant	

 $^{^{\}rm 1}$ Limited civil cases are discussed in California Code of Civil Procedure \S 85.