



NEW WESTMINSTER

STATEMENT OF PROPERTY DAMAGE/PERSONAL INJURY

Return to: Legislative Services, City of New Westminster
511 Royal Avenue, New Westminster, BC V3L 1H9 FAX: 604-527-4594

Note: For completion by a party claiming the City of New Westminster is responsible for damage to his/her property or person.

Please attach additional pages if you require more space.

1. Name: _____ Telephone: _____
Address: _____ Postal Code: _____
City: _____ Email Address: _____
Is claimant under 19 years of age? Yes No
2. Description of incident:
(Attach photos if any)
3. Incident Date: D M Y Time: AM PM
Police Incident # (if applicable):
Location where incident occurred:
4. Indicate cause of incident:
5. Amount of Claim (Attach repair invoices, estimates and/or original receipts): \$
6. Who was the damage/injury first reported to? Date:
7. Did the incident occur as a result of work being performed by a contractor? Yes No
If yes, please provide the name of the contractor and contact person, if known.
8. State why you feel the Municipality should be responsible for your damage/injury:

9. I solemnly swear that I am the owner of the property damaged and/or that the foregoing is a correct and accurate statement as to the damage incurred and that I have no insurance of any type under which such damages may be recoverable.

I fully understand that this official statement setting out the time, place and manner in which the damage/injury was sustained **must be delivered to the Legislative Services Department in writing within two months** from the date of the incident. (Section 736 of the Local Government Act, R.S.B.C. 2015, c. 1)

I acknowledge that this statement is for information purposes only and its receipt in no way infers acceptance of any responsibility by the City for the stated damage.

Signature:

Date:

The information on this form and any further correspondence with the City about this claim is collected by the City of New Westminster under Section 26(c) of the Freedom of Information and Protection of Privacy Act for the purpose of managing claims. Should you have any questions about the collection of this personal information please contact the Records and Information Administrator, 511 Royal Avenue, New Westminster, V3L 1H9, 604-515-3764.