



CITY OF NAMPA

Notice of Claim
411 3rd St. S.
Nampa, ID 83651
Phone: (208) 468-5415
Fax: (208) 465-2314

Deborah Bishop, City Clerk
bishopd@cityofnampa.us

In compliance with applicable Sections of Title 6, Chapter 9, Idaho Code, the undersigned hereby presents a claim against the City of Nampa, Idaho, for damages arising out of an occurrence, which happened as follows:

1. Claimant Information

Name: (Last) (First) (M) Phone Number:

Address: (Street) (City) (State) (Zip)

Former address if at current address less than six months:

(Street) (City) (State) (Zip)

2. Date and time of occurrence

3. Place or location of occurrence

4. Cause of damages (describe the details or circumstances of the accident or occurrence)

5. Amount of claim \$ (attach all bills or other substantiating information verifying the amount of your claim)

6. Bodily injury (describe the extent of your injury, attending physician, place of emergency treatment and any other pertinent information)

7. Property damage (describe property/vehicle damaged)

8. Witnesses

Table with 3 columns: Name, Address, Phone Number

9. I hereby certify that all of the above statements are true and correct to the best of my knowledge

(Signature of Applicant) (Date)