

CITY OF RACINE  
CITY CLERK'S OFFICE  
730 WASHINGTON AVENUE  
RACINE WI 53403

**LIABILITY CLAIM INFORMATION**

**INSTRUCTIONS:** Please fill out this form completely within 120 days from the incident.  
Sign, date and return the completed form to the address listed above.

1. Date and time of incident: \_\_\_\_\_

2. Location of incident: \_\_\_\_\_

3. Name of property owner or injured person: \_\_\_\_\_

\_\_\_\_\_  
(Age, if minor: \_\_\_\_\_)

4. Address: \_\_\_\_\_

5. Telephone number: (H) \_\_\_\_\_ (W) \_\_\_\_\_

6. Please give a detailed description of the incident (use back of form if necessary).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Total amount of claimed damages: \$ \_\_\_\_\_  
(attach itemized statements of bills)

**NOTE: If damage is to an automobile, the City requires two estimates to process the claim.**

8. Witness name, address, and telephone number:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of person filing claim

Date received in City Clerk's Office:

Date sent to City Attorney's Office:

\_\_\_\_\_

\_\_\_\_\_

## **HOW TO FILE A CLAIM AGAINST THE CITY**

A citizen has 120 days (about 4 months) from the date the incident occurred to file a Liability Claim (attached form) or a “Notice of Circumstance” with the Office of the City Clerk, 730 Washington Avenue, Racine, WI 53403 located on the first floor of City Hall.

You must also submit a “Notice of Claim” to the Office of the City Clerk when you identify the final amount of your costs and expenses for the damages and/or injuries you believe were incurred as a result of the incident.

You should read section 893.80 of the Wisconsin Statutes (available at the Racine Public Library) for additional information about this process, or contact your insurance agent or attorney.