

CLAIMS NOTICE

POOL MEMBER: _____

MEMBER ADDRESS: _____

LIABILITY **PROPERTY**

PLEASE ATTACH MEMBERS NOTICE OF CLAIM ORDINANCE OR PROVISION AND ANY WRITTEN NOTICE RECEIVED FROM CLAIMANT.	DATE OF NOTICE TO FUND MEMBER	CONTRACT NUMBER	COVERAGE EFFECTIVE DATE	POOL MEMBER'S CONTACT PHONE NUMBER
DATE & TIME OF ACCIDENT OR LOSS <input type="checkbox"/> AM <input type="checkbox"/> PM	LOCATION OF ACCIDENT OR LOSS			POLICE INVESTIGATION? <input type="checkbox"/> YES <input type="checkbox"/> NO ATTACH REPORT
DESCRIPTION OF ACCIDENT OR LOSS				
DESCRIBE DAMAGE TO POOL MEMBER'S PROPERTY				
POOL MEMBER'S VEHICLE, YEAR, MAKE	MODEL	VEHICLE IDENTIFICATION NUMBER		LICENSE PLATE NUMBER
ANY OTHER COVERAGE FOR THIS CLAIM <input type="checkbox"/> YES <input type="checkbox"/> NO	INSURANCE COMPANY			POLICY NUMBER
NAME OF POOL MEMBER'S DRIVER		AGE	ADDRESS	
MEMBER'S DRIVER TITLE OR POSITION		MEMBER VEHICLE USED WITH MEMBER'S PERMISSION <input type="checkbox"/> YES <input type="checkbox"/> NO	REPAIR ESTIMATE <input type="checkbox"/> YES <input type="checkbox"/> NO	AMOUNT OF ESTIMATE
DEPARTMENT	DEPARTMENT HEAD	SUPERVISOR		OFFICE PHONE/EXTENSION
CLAIMANT NAME		ADDRESS		PHONE
ADDITIONAL CLAIMANT NAME		ADDRESS		PHONE
CLAIMANT AUTO: MAKE, YEAR, PLATE NO.	CAR OR PROPERTY INSURED? <input type="checkbox"/> YES <input type="checkbox"/> NO	COMPANY OR AGENCY NAME & POLICY NUMBER		
LOCATION OF CLAIMANT'S VEHICLE		REPAIR ESTIMATE <input type="checkbox"/> YES <input type="checkbox"/> NO	AMOUNT OF CLAIMANT ESTIMATE	PRIOR DAMAGE TO CLAIMANT VEHICLE <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF INJURED	ADDRESS		PHONE NUMBER	EXTENT OF INJURY
CLAIMANT OCCUPATION		CLAIMANT EMPLOYER		CLAIMANT RELATED TO POOL MEMBER EMPLOYEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF WITNESS		ADDRESS		PHONE NUMBER
ADDITIONAL WITNESS		ADDRESS		PHONE NUMBER
*SUGGESTION - IF CAMERA AVAILABLE, PLEASE TAKE SCENE PHOTOS				
MEMBER SPECIAL REQUESTS				

PLEASE ATTACH MEMBER REPORTS

TEXAS MUNICIPAL LEAGUE INTERGOVERNMENTAL RISK POOL