INSTRUCTIONS FOR COMPLETING A STANDARD TORT CLAIM FORM

- Before presenting a Standard Tort Claim form, please read these instructions, the Standard Tort Claim form, and other appropriate forms in their entirety.

- Type or print clearly in ink and sign the Standard Tort Claim form.

- Provide all requested information and any available documents or evidence supporting your claim, such as medical records or bills for personal injuries, photographs, proof of ownership for property damages, receipts for property value, etc.

- If the requested information cannot be supplied in the space provided, please use additional blank sheets so your Standard Tort Claim form can be easily read and understood.

- The following are examples on how to complete the Standard Tort Claim Form:
  1. Smith, Betty Ann
  2. 1234 Main Street, Apt. 56, Everett WA 98201
  3. PO Box 910, Everett WA 98201
  4. Same (or residence at the time of incident)
  5. 425-123-4567
  6. bsmith@hotmail.com
  7. 8:00 a.m., August 2, 2010
  8. If the incident that caused the damages occurred over a period of time, please provide the beginning time and the ending time in item 8.
  9. Washington, Snohomish, Everett, Everett High School
  10. I-5, Southbound, Milepost 192, near the 41st Street Exit
  11. Everett High School
  12. List all witnesses having knowledge of the incident in question, with their names, addresses, and telephone numbers.
  13. List all district employees having knowledge of the incident in question, with their names, addresses, and telephone numbers.
  14. List all other witnesses having knowledge of the incident in question, with their names, addresses, and telephone numbers that are not listed within items 12 and 13. Also include a description of their knowledge.
  15. Please describe the incident that resulted in the injury or damages, specifically answering the questions who, what, where, when and why.
  16. If you reported this incident to law enforcement, safety or security personnel, please provide a copy of the report or contact information to the person you spoke with.
  17. Please provide all of your medical providers with their names, addresses, telephone numbers, and the type of treatment. If you were treated for a personal injury, please include your medical records and bills.
  18. Please attach any additional documentation which supports the claim’s allegations.
  19. Please provide the dollar amount you are claiming for your damages, including your time loss, medical costs, property damage loss, etc. This amount should represent your opinion of total loss.

- Please sign, date and provide the location of where your Claim Form was signed.

- If you are presenting a personal injury claim, please sign and attach the Medical Release form.

- If your claim involves a motor vehicle accident, please complete, sign, and attach the Vehicle Collision form.