

## NOTICE OF CLAIM AGAINST CHIPPEWA COUNTY

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Accident/Loss: \_\_\_\_\_ Time of Day: \_\_\_\_\_ a.m./p.m.

County Department Involved: \_\_\_\_\_ Vehicle #: \_\_\_\_\_

Photos taken:     \_\_\_Yes \_\_\_No           Weather Conditions: \_\_\_\_\_

Police called:     \_\_\_Yes \_\_\_No           Date: \_\_\_\_\_

Agency: \_\_\_\_\_

Case No.: \_\_\_\_\_

Type of Claim:     \_\_\_Vehicle\_\_\_Property\_\_\_Personal Injury

Dollar Amount of Damages Claimed:     \$ \_\_\_\_\_

Briefly state the facts of the accident/loss (include additional pages, if necessary, along with any supporting documentation/information/photos; **do not staple**):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit Claim to:** Jaclyn J. Sadler, Chippewa County Clerk  
Chippewa County Courthouse  
711 N. Bridge Street, Room 109  
Chippewa Falls, WI 54729