

NAMES AND ADDRESSES OF ALL PERSONS INVOLVED OR WITNESSES TO THE ACCIDENT:

I, _____, DO SOLEMNLY SWEAR OR AFFIRM THAT ALL THE STATEMENTS MADE IN THIS CLAIM ARE TRUE AND CORRECT TO THE BEST OF KNOWLEDGE, SO HELP ME GOD.

SIGNATURE OF CLAIMANT **DATE**

STATE OF TEXAS §
COUNTY OF TARRANT §

BEFORE ME, on this day personally appeared _____, known to me or proved to be the person whose name is subscribed to this instrument, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Subscribed and sworn to before me this _____ day of _____, _____.

(SEAL)

NOTARY PUBLIC SIGNATURE

NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

PROVIDING FOR NOTICE TO THE CITY COUNCIL OF PROPERTY DAMAGE, PERSONAL INJURY, DEATH; PROVIDING THE TIME AND LOCATION WHERE SUCH NOTICE IS TO BE GIVEN; PROVING THAT SUCH NOTICE MAY NOT BE WAIVED; AND PROVIDING THAT THE TIMELY FILING OF NOTICE OF ANY CLAIM AND REFUSAL OF SAME BY THE CITY COUNCIL IS A CONDITION PRECEDENT TO THE INSTITUTION OF ANY SUIT; PROVIDING FOR VERIFICATION OF THE NOTICE OF CLAIM; AND PROVIDING A SEVERABILITY CLAUSE.

City Must Submit To: **Texas Municipal League (FAX: 512-491-2366 OR EMAIL: claims@tmlirp.org)**
Copies to: **City Manager, City Attorney, City Council, Dept.:** _____