

# OAK PARK

14000 Oak Park Blvd., Oak Park, MI 48237 • (248) 691-7400 • [www.OakParkMI.gov](http://www.OakParkMI.gov)

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## Claim Form for Injury / Damages

Section 19.5 of the Charter of the City of Oak Park, Michigan, requires anyone claiming injury or damages to submit a written statement to the City Clerk at 14000 Oak Park Blvd.

Questions regarding a submitted claim should be directed to the City Manager's Office at (248) 691-7410.

If you are filing a claim for a sewer backup pursuant to PA 222 of 2001, this form must be filed within 45 days of the occurrence, or your claim may be barred.

In accordance with provisions of Section 19.5 of the Charter of the City of Oak Park, I hereby submit a claim for injury/damages sustained by:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of incident: \_\_\_\_\_

Address where injury/incident occurred: \_\_\_\_\_

Describe nature of injury/damages, extent of injury/damages, and circumstances under which said injury or damages occurred:

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(OVER)

In case of injury, was medical treatment given? \_\_\_\_\_

If so, by whom? \_\_\_\_\_

Date of treatment: \_\_\_\_\_

Is further medical treatment indicated? If so, please explain: \_\_\_\_\_

\_\_\_\_\_

Names and addresses of witnesses:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In case of property damage, has a claim been filed with any other entity? \_\_\_\_\_

If so, with what entity? \_\_\_\_\_

Relationship of injured person to person making report: \_\_\_\_\_

I hereby notify the clerk of the City of Oak Park, Michigan, that I intend to hold the city of Oak Park liable for injuries/damages sustained by \_\_\_\_\_ on \_\_\_\_\_ as above described.

\_\_\_\_\_  
(Signature of claimant)