

Statement of Damage or Injury Claim Form

Please submit completed form to *info@wembley.ca*

		EMAIL	PRINT
Claimant Informat	ion		
Name			
Address		Town	
Province		Postal Code	
Phone		Email	

Driver / Vehicle Information						
Date of Incident			Insurance Company			
Time of Incident			Policy #			
Weather Conditions			Vehicle Make		Model	
Seat Belts Worn Yes No Injuries Yes No Vehicle Year						
Locations (Please be specific referencing direction of travel, land, and closest intersection or reference point)						

Description of Damages		Estimated Cost of Damages (Please include at least 2 estimates or receipts if repairs had been completed)		
For Claims Involving Equipment or Vehicles: Un	nit#		Police Report #	

Property Information					
Address / Location of Incident					
Date of Incident		Time of Incident		Weather Condition	
Insurance Company				Policy #	
Cause of Damage to Property					

Description of Damages	Estimated Cost of Damages (Please include at least 2 estimates or receipts if repairs had been completed)		
For Claims Involving Town Equipment or Vehicles: Unit #	Police Report #		



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Personal Injury Information			
Address / Location of Incident			
Date of Incident	Time of Incident	Weather Condition	
Cause of Injury			

Description of Injuries

Passengers / Witnesses and Municipal Staff Involved (Name / Address / Telephone / Email)			
Name / Relationship	Address	Telephone / Email	
Signature	Date		

PLEASE NOTE: By typing your name into the signature box above (or by signing a printed version of this form), you agree that all information submitted on this form is true and accurate.

PLEASE NOTE: A fully completed form is to be sent to the town addressbelow bymail, email, or fax upon which you should receive an acknowledgment that your claim was received. Be aware that there are notice periods for providing the Town of Wembley withnotice of certain types of claims and limitation periods in respect of all claims. If you do not commence legal action to advance your claim within two years of the date of the incident causing your loss or damage, the Town of Wembley and its employees will be entitled to immunity from liability in respect of your claim pursuant to the provisions of the Limitations Act of Alberta. This statement is for information purposes only and its receipt in no way infers acceptance of any responsibility by this municipality for the stated damages or injuries.

PLEASE NOTE: The personal information on this form is being collected in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIPAct)RSA2000 CF-25. If you have any questions about the collection, use and protection of this information, please contact the Town of Wembley FOPCoordinator at **780-766-2269**.

For Office Use Only	
First Received By	
Date	Investigation & Follow Up
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info@wembley.ca PO Box 89 Wembley, AB TOH 3S0 Fax: 780-766-2868