

150588

FILED - 10RD
SKAM
BY George Lantz
Oct 3 2 22 PM '03
V. Germanu
J. MICHAEL GERVISON

Supervisor ☒
Deputy ☒
Recorder ☒
Clerk ☒
Judge ☒
Notary ☒

SKAMANIA COUNTY CLAIM FOR DAMAGE FORM

CLAIMANT: THIS CLAIM MUST BE FILED WITH THE

SKAMANIA COUNTY CLERK OF THE BOARD
Skamania County Auditor's Office
Skamania County Courthouse
240 North West Vancouver Avenue, Room 27
Stevenson, WA 98648

FOR OFFICE USE ONLY:

CLAIM NO. _____

DATE FILED: _____

COPIES TO: _____

NO DAMAGES CAN BE PAID BY SKAMANIA COUNTY UNLESS THIS FORM IS COMPLETE. THIS PROVISION CANNOT BE WAIVED.

ATTACHMENTS: YES(☐) NO

1. Name (including spouse if married): (Please Print)
GEORGE, GLORIA LANTZ
2. 32 RIKE RD STEVENSON WA
Address City State Zip
3. HM Phone: 427 8946 WK Phone: _____ MSSG Phone: 98648
4. Date and time of incident: 8/4/03
5. Location of incident:
32 RIKE RD IN MY DRIVEWAY
6. Describe in narrative form and in detail exactly how the incident occurred:
I WALK UP TO PICK UP MY MAIL (EVER DAY)
MY DOG COMES WITH ME HE LIKES TO EAT
THE GRASS I DID NOT KNOW AND HAD NO
WARNING THAT SOME SPRAYED WEED KILLER
45 FT. DOWN MY DRIVEWAY MY DOG ATE THE GRASS
7. What is the amount of damages claimed arising out of the following circumstances
(Include estimates and bills, if available): VET BILL 370.00

8. Please list name and address of any and all witnesses or persons involved:
(Please Print)

MY WIFE I SHOWED HER A BRANCH
WITH WEED KILLER IT SMELLED SO BAD
WE HAD TO GET IT OUT OF THE HOUSE

9. Describe the damages or injuries you sustained as a result of the incident: MY
DOG SUFFERED FOR THREE DAYS FROM
THE WEED KILLER THE VET DID NOT
KNOW WHAT TOXEMIA YOU DID NOT WARN
ME
INCURRED

10. Was incident investigated by a police officer? Sheriff _____ State Patrol _____
City _____

11. If a vehicle was involved in the incident, describe: Make _____
Model _____ Year _____ State _____ License No. _____
Insurance Company _____ Policy Number _____

12. Describe what you did after the incident occurred: _____

13. Describe the conversations you had, if any, with County personnel during or after
the incident occurred. THEY SAID THEY WOULD
COME THE NEXT DAY I WAS HOME
FOR TWO DAYS NO ONE CAME

14. How did you identify the County as the party responsible for your damage?
WHEN I SEEN THE SMALL TREES AN GRASS
DEAD, YOU ARE THE ONLY ONE TO USE IT

I certify under penalty of perjury under the laws of the State of Washington that the
information contained in this claim is true and correct.

DATED THIS 3 DAY OF 10/03, 20

Alfred E. Lantz
Claimant's Signature

File Name: Commis/Risk Mang/Claims/Claim For Damages

NOTE: Personal property (car, etc.) damages are to be accompanied by 2 estimates for repair costs. The Skamania
County Risk Manager will investigate this claim. The decision to honor this claim will be based upon that investigation.
Making a false report or providing false evidence is a crime and punishable by fine and/or imprisonment. Additional
pages may be attached if needed to answer the questions.