

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)

RICHARD POTTER

2. 162 RUNDELL RD. UNDERWOOD WA 98651
Address City State Zip

3. HM Phone: 493-1912 WK Phone: 509-364-3331 MSSG Phone: _____

4. Date and time of incident: JAN 5 or 6 2004

5. Location of incident:
MAIL BOX ON COOK UNDERWOOD RD. @ RUNDELL RD.

6. Describe in narrative form and in detail exactly how the incident occurred:
SNOW PLOW STRUCK MAILBOX POST KNOCKING IT
OVER & BENDING MAILBOX

7. What is the amount of damages claimed arising out of the following circumstances
(Include estimates and bills, if available): \$100.00 MAILBOX, 6"x6"x8' Post
PLUS LABOR.

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

9. Describe the damages or injuries you sustained as a result of the incident: _____

10. Was incident investigated by a police officer? NO Sheriff _____ State Patrol _____
City _____

11. If a vehicle was involved in the incident, describe: Make _____
Model _____ Year _____ State _____ License No. _____
Insurance Company _____ Policy Number _____
NONE

12. Describe what you did after the incident occurred: CALL PD. THEY TOLD
ME TO CALL FOR A CLAIM FORM.

13. Describe the conversations you had, if any, with County personnel during or after
the incident occurred. VERY POLITE & PROFESSIONAL

14. How did you identify the County as the party responsible for your damage?

MAIL BOX ON COUNTY RD.

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 26 DAY OF January, 2004

Richard H. Hest
Claimant's Signature

File Name: Commiss/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.