



## SKAMANIA COUNTY CLAIM FOR DAMAGE FORM

CLAIMANT: THIS CLAIM MUST BE FILED WITH THE

SKAMANIA COUNTY AUDITOR  
Skamania County Courthouse  
240 NW Vancouver Ave, Room 27  
PO Box 790  
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)

SEAN BLISS cindy BLISS

2. 51 Barnes RD carson WA 98616  
Address City State Zip

3. HM Phone: 427-8785 WK Phone: \_\_\_\_\_ MSSG Phone: 427-5974 Grandma

4. Date and time of incident: DEC 29-08 approx 2:30 or 3:00

5. Location of incident:

51 Barnes RD carson

6. Describe in narrative form and in detail exactly how the incident occurred:

Gary Blaisdell was widening snow berm did  
NOT SEE Trailer I was across street + whistling  
and yelling But he could not hear me  
For the noise of the 966-or front end loader

7. What is the amount of damages claimed arising out of the following circumstances  
(Include estimates and bills, if available): 500.00

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

(Please Print)

SEAN BLISS 51 BONES RD CARSON WA 98610

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

NO PERSONAL INJURIES - ONLY DAMAGE TO TRAILER

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 \_\_\_\_\_

12. Describe what you did after the incident occurred: Talked with another county employee NOT Gary Brisdell and I was told to contact the auditors office so I did talked to gngela moseb.

13. Describe the conversations you had, if any, with County personnel during or after the incident occurred. county employee stopped not sure of his name. He looked at trailer and told me how to handle it. so I am proceeding.

14. How did you identify the County as the party responsible for your damage?  
I personally know Gary and there IS a Big Skamania county sticker on side of machine

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 30 DAY OF DEC, 2008

  
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.