



## SCARBOROUGH BOROUGH COUNCIL

### CLAIM FORM

The issue of this form by Scarborough Borough Council is not to be taken as an admission of liability.

In order that your claim may be considered, please complete the relevant sections of this form and return it to the address at the end of the form.

#### **PERSONAL DETAILS:**

Name:

Date of Birth:

Address:

Occupation:

Daytime Tel No:

Work Tel No:

Mobile Tel No:

#### **ACCIDENT DETAILS:**

Date of incident:

Time:

am/pm

Incident Location:

State fully the circumstances of the incident (additional space is provided on page 5):

Were there any witnesses to the incident? If so, please give their name(s) and address(es):

Was the incident reported to the police? If so, please give the number and name of the police officer and the address of the police station:

**INJURIES SUSTAINED:**

If you suffered personal injuries please give full details: (Confirmation from your doctor and/or hospital may be required. You may also be requested to undergo an independent medical examination).

**SKETCH PLAN OF ACCIDENT LOCATION:**

**VEHICLE DAMAGE:** *(Please contact your own motor vehicle insurer.)*

If your vehicle was damaged please complete the following:

Make:

Model:

Year of manufacture:

Registration Number:

State the nature of the damage:

If a repair estimate or invoice is available please forward a copy. Please also indicate where the vehicle can be inspected or who can be contacted to arrange an inspection, should this be necessary:

If you are not the owner of the vehicle please give the owner's name and address:

Who (if anyone) was driving the vehicle at the time of the accident:

Speed of the vehicle at the time of the accident:

Please give the name(s) and address(es) of any passenger(s) in the vehicle at the time of the accident:

Has the insurer of the vehicle been notified? If so, please give their name, address, policy and reference number (if applicable):

Is the vehicles insurance cover:           Comprehensive            Third Party   
(tick as appropriate)

**PROPERTY DAMAGE:**

If your property was damaged please complete the following:

Type of Property:

Address of Property:

State the nature of the damage:

When was the damage first observed:

If you are not the owner of the property, please give the owner's name and address:

If a repair estimate or invoice is available please forward a copy.

**OTHER LOSSES:**

If you have incurred any other loss e.g. damaged clothing etc please state below indicating the original cost, the age of the item, and the replacement cost. Please also include receipts where possible.

**ADDITIONAL INFORMATION:**

The Scarborough Borough Council takes seriously its responsibility for safeguarding the welfare of its residents and visitors. The Council also has a duty to ensure that the Council Tax Payers are protected from unnecessary costs due to fraud and should a claim be found to be fraudulent Criminal Proceedings may be brought under the Theft Act 1968.

In signing this claim form you accept the above warning in respect of fraudulent claims and declare that the contents of your claim are true and accurate.

**Signed:**

**Date:**

Please return the completed form to:

Scarborough Borough Council  
Insurance Section  
Financial Services  
Town Hall  
St Nicholas Street  
SCARBOROUGH  
YO11 2HG

**Using your personal information**

We will process your personal information in accordance with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018. We may use your personal information in a number of ways, but only for the purposes for which it was given, for example to provide you with the information or services requested or to administer and protect public funds. We may share your information with, and obtain information about you from, other departments of the Council or other organisations where it is lawful to do so, for example to check the accuracy of information or to prevent or detect crime. For further information on how we collect, use, share, secure and retain your personal information, and your legal rights, please see our Privacy Notice at [www.scarborough.gov.uk/gdpr](http://www.scarborough.gov.uk/gdpr) or by contacting Customer First. Our Data Protection Officer can be contacted at the Town Hall, St Nicholas Street, Scarborough, YO11 2HG (tel 01723 232323 or email [dataprotection@scarborough.gov.uk](mailto:dataprotection@scarborough.gov.uk))