

**TORT NOTICE OF CLAIM**

**41-4-16. Notice of Claims.**

**A. Every person who claims damages from the state or any local public body under the Tort Claims Act {41-4-1 to 41-4-27 NMSA 1978} shall cause to be presented to the Risk Management Division for claims against the state, the mayor of the municipality for claims against the municipality, the superintendent of the school district for claims against the school district, the county clerk of a county for claims against the county, or to the administrative head of any other local public body for claims such local public body, within ninety days after an occurrence giving rise to a claim for which immunity has been waived under Tort Claims Act, a written notice stating the time, place and circumstances of the loss or injury.**

**DATE OF INCIDENT:** \_\_\_\_\_

**TIME OF INCIDENT:** \_\_\_\_\_

**DEPARTMENT INVOLVED:** \_\_\_\_\_

**CLAIMANT'S NAME & ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**LOCATION OF ACCIDENT:** \_\_\_\_\_

**Please describe how the incident occurred and why you feel County Department is at fault:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What are you making claim for: Please check one**

**Bodily Injury**       **Property Damage**

**Please describe injury or property damage:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Claimant or lawful representative

**Mail claim to: Torrance County Clerk's Office  
P.O. Box 48  
Estancia, NM 87016  
Phone: (505) 544-4700  
Fax: (505) 384-5294**