

PROPERTY & LIABILITY CLAIMS REPORTING

Report claims **IMMEDIATELY** to:

Southern California:
Keenan & Associates
Attn: PLCA Department
P.O. Box 4328
Torrance, CA 90510
Fax: (310) 212-6847

Northern California:
Keenan & Associates
Attn: PLCA Department
180 Grand Avenue
Oakland, CA 94612
Fax: (510) 986-6756

TYPES OF CLAIMS

- Third Party Liability
- Automobile – Third & First Party
- Property – First Party
 - After Hours - Emergency Hot Line # (310) 375-8311
- DFEH and/or EEOC Complaints
- Potential Claims – serious injuries/fatalities
- Lawsuits

REPORTING TIMELINES

- As soon as possible, but not later than 30 days after discovery of the loss. They can be called in or fax/mail the appropriate claim form.
- For Crime Losses – must be reported within 60 days of discovery.
- Notify the police if a law may have been broken, i.e. arson.

PROPERTY & LIABILITY CLAIMS REPORTING

CLAIM REPORTING FORMS (copies attached)

- A. Third Party - Liability & Auto
- B. Report of Accident – Auto
 - Kept in Each District Vehicle
- C. Property – First Party
- D. Equipment Breakdown (formerly Boiler & Machinery)

TORT CLAIM TIMELINES

FILING CLAIMS

- 6 months
Bodily injury, property damage or personal injury
- 1 year
Breach of contract or claim for minors

RESPONSES TO CLAIMS

- Rejections
 - District Board must act within 45 days after receipt, Government Code 912.4
- Deficient Notice
 - Within 20 days of receipt of claim
- Untimely Claim Notice
 - Within 45 days of receipt of claim (doesn't apply to breach of contract claims)

PROPERTY & LIABILITY CLAIMS REPORTING

MISCELLANEOUS

- For reference purposes, information regarding tort claims is enclosed.
- A District must provide a claimant with a claim form if requested.
- Refer to the Risk Management Resource Library for additional information.

***ALL CLAIMS
SHOULD BE DATE STAMPED
WHEN RECEIVED!***

CLAIM FORM

TO: (Contact Person)
(District Name)
(Address)

1. Claims for death, injury to person, or to personal property must be filed not later than six (6) months after the occurrence (Govt. Code, Section 911.2)
2. Claims for damages to real property or breach of contract must be filed not later than one year after the occurrence (Govt. Code, Section 911.2)

Name of Claimant DOB Phone No.

Address City Zip

WHEN did damage or injury occur? _____

WHERE did damage or injury occur? _____

HOW and under what circumstances did damage or injury occur? _____

WHAT particular action by the District or its employees caused the alleged damage or injury: (Include names of employees, if known) _____

WHAT sum do you claim: Include the estimated amount of any prospective loss insofar as it may be known at the time of the presentation of this claim, together with the basis of computation of the amount claimed; attach estimates or invoices, if possible. (If amount claimed exceeds \$10,000, no dollar amount shall be stated).

_____ \$ _____
_____ \$ _____
_____ \$ _____
Total Amount Claimed \$ _____

If total amount claimed exceeds \$10,000, is this a Limited Civil case? Yes _____ No _____

NAMES and addresses of witnesses, doctors and hospitals: _____

DATE: _____

Signature of Claimant

NOTICE: Section 72 of the California Penal Code provides: "Every person who with intent to defraud, presents for payment to any School District any false or fraudulent claim, is guilty of a felony punishable by fine and/or imprisonment."

**INSERT BLUE "REPORT OF ACCIDENT" FORM
(AUTO)**

PROPERTY CLAIM FORM

DISTRICT

Name: _____

Address: _____

Date of Loss: _____

CONTACT

Name: _____

Title: _____

Phone: _____

Time: _____ a.m.
_____ p.m.

LOSS LOCATION

Site Name: _____

Address: _____

Site Contact: _____

Phone: _____

Type of Loss: Fire Theft Lightning Hail Flood Wind
Other (Explain) _____

Description of Loss & Damage: _____

Police or Fire Dept. to which reported _____

Report # _____

Completed by: _____ Date: _____

Fax completed form to:
Keenan & Associates, PLCA
(310)212-6847 (Torrance) (510) 986-6756 (Oakland)