



Please return the form at:

Town Clerk's Office
Town of Hampstead
5569 Queen Mary Road
Hampstead, Quebec

PROCEDURE OF CLAIM

IDENTIFICATION			
Last Name		First Name	
Address			
Town		Postal Code	
Phone (domicile)		Phone (office)	
Phone (cellphone)		E-mail	

DESCRIPTION OF THE EVENT			
Place of the event		Date and Time of the event	
Police Report nbr. (if applicable)		Request number (if applicable)	

Brief description of the cause of damage:

Brief description of the damage (include all relevant documents, i.e.: pictures, bills, evaluations)

Date: _____

Signed at: _____

Signature: _____

Important:

The claimant must file with the Town Clerk of the Town of Hampstead a written procedure of claim within the fifteen (15) days of the date of the event under penalty of **DENIAL** of his claim. Although it is not required to provide such procedure in respect of bodily injury, it is desirable to transmit a procedure of claim as soon as possible.

The present form is made available with the sole objective of assisting the claimant with his/her application. The municipality assumes no responsibility for the method in which the claimant completes this form.