

(This form is to be used when a citizen claims the Town is responsible for damage done to their property.  
This form must be sent to the Town Clerk and a copy sent to Christine Adanti, HR.)

## TOWN OF GROTON Private Property Damage Report

Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Date of Damage: \_\_\_\_\_ Time of Damage: \_\_\_\_\_

Location of Damaged Property: \_\_\_\_\_  
\_\_\_\_\_

Property Damaged: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did it happen? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Witnesses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature of Person completing form, if other than Claimant: \_\_\_\_\_

(PLEASE SUBMIT WITH FORM ANY SUPPORTING DOCUMENTATION RELATING TO CLAIM).

SEND TO:  
TOWN CLERK  
TOWN OF GROTON  
45 FORT HILL ROAD  
GROTON, CT 06340

Issued by: Administrative Services  
July 2016

(This form is to be used when a private citizen is injured on Town property.)

**Please submit this form to Christine Adanti, HR.**

**TOWN OF GROTON  
Injury to Private Citizen on  
Town Property**

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Date of Injury:** \_\_\_\_\_ **Time of Injury:** \_\_\_\_\_

**Location of Incident:** \_\_\_\_\_

**Description of Injury:** \_\_\_\_\_

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

**How Did It Happen?**

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

**Witnesses:** \_\_\_\_\_

\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Signature of person completing form if other than injured party:** \_\_\_\_\_

**SEND TO:**

**Christine Adanti  
TOWN OF GROTON  
45 FORT HILL ROAD  
GROTON, CT 06340**

Issued by: Human Resources Dept.  
June 2017