

**Instructions for Alabama State Board of Adjustment
Claim for Property Damage**

www.bdadj.alabama.gov

Note: Claims must be presented to the Alabama State Board of Adjustment within one year after the date of the property damage. If all questions on the claim form are not answered, the claim will not be accepted. Forms must be printed in ink or typed. All supporting documentation must be submitted on 8 ½ x 11 paper, front side only.

Please Note: The claims process may take several months to complete.

Claim forms must be accompanied by all of the required documentation or your claim will be returned requesting further information. Any delays could cause the dismissal of your claim.

- **Mail Completed Forms to:**

Alabama State Board of Adjustment
600 Dexter Avenue, Suite E-302
Montgomery, AL 36130-1435

- **Forms may be Delivered to:**

Alabama State Board of Adjustment
State Capitol Building, Suite E-302
Montgomery, Alabama

- Telephone Numbers: (334) 242-7175 Fax: (334) 242-2008

1. Enter the name of the state agency you are filing your claim against. (Example: Department of Transportation, Department of Education, etc.)
2. Enter your personal information. Enter your name, address, telephone number(s), email address, the last four digits of your Social Security Number or the last four digits of your FEIN if a business. Claims without the last four digits cannot be processed and will be returned to the claimant.
3. If you have an attorney, enter your attorney's information. (Note: If an attorney is listed, all correspondence will be with the attorney only.)
4. **Facts of the Claim:**
 - A. Enter the date the property damage occurred.
 - B. Enter the location or address where the property damage occurred.
 - C. Enter a statement of facts describing the property damage and the events surrounding the damage. Documentation must accompany the claim for proof of the damage claimed. Provide an official accident or incident report and any other evidence to prove that the incident upon which the claim is based took place. (Photographs and other documents must be provided in printed form. Documents will not be printed from CDs, flash drives, or other electronic media.)
5. **Damages to Personal Property:**

List all expenses you are claiming and the amount for each. Describe the personal property damaged. (Year, make, and model of vehicle, watch, eyeglasses, clothing, etc.) Attach copies of invoices, proof of purchase, replacement cost quote, etc. If claiming damage to a vehicle, two estimates for

repair or a copy of the receipt for repair are required. Claims for vehicle damage must be filed by the owner of the vehicle. If claiming mileage, use the Mileage Log which is listed on the web site, www.bdadj.alabama.gov.

Enter the total dollar amount for the items being claimed which were damaged.

6. Sign the claim form in the presence of a notary public, print your name, and have the notary complete the verification section.

**ALABAMA STATE BOARD OF ADJUSTMENT
CLAIM FOR PROPERTY DAMAGE**

See Page 1-2 of this form for instructions. Each number on the form corresponds with numbers on instruction sheets. Read all instructions carefully to ensure your claim is not returned for additional supporting documentation. See instruction above for mailing or hand delivering this form to the Board of Adjustment (Page 1).

DO NOT WRITE IN THIS SPACE. FOR ALABAMA STATE BOARD OF ADJUSTMENT USE ONLY.

Claim No.: _____

1. Enter the name of the department or agency of the State of Alabama against which you are making this claim:

2. Enter your name, mailing address, email address, telephone number(s), and Social Security Number or FEIN.

Name: _____

Street Address or P.O. Box: _____

City, State, Zip Code: _____

Email Address: _____

Home Telephone No.: _____ Office Telephone No.: _____

Cellular Telephone No.: _____ Fax No.: _____

Claimant's last four digits of Social Security Number or last four digits of business FEIN:

SSN: XXX-XX-_____ FEIN: XX-XXX _____

If injured party is a minor (under 19 years of age), claim must be signed and filed by parent or guardian as claimant. Give the name and age of minor and the name and relationship of person with whom the minor lives.

Name of Minor: _____ Age of Minor: _____

Name of Person with whom Minor Lives: _____

Relationship of Person to Minor: _____

3. Claimant's Attorney: (NOTE: If an attorney is listed, all correspondence will be with the attorney only.)

Attorney Name: _____

Street Address or P.O. Box: _____

City, State, Zip Code: _____

Email Address: _____

Office Telephone No.: _____ Fax No.: _____

4. Facts of Claim:

A. Date Damage Occurred: _____

B. Where did accident or damage occur: _____

Claimant's Name _____

C. Statement of Facts: _____

5. Damages to Personal Property:

List all expenses you are claiming and the amount for each. Describe personal property damaged: year, make, model of vehicle, watch, eyeglasses, clothing, etc. Attach copies of invoices, proofs of purchase, replacement cost, etc. If claiming mileage, complete and attach the Mileage Log form which is listed on the web site:

www.bdadj.alabama.gov.

Item	Amount of Expense
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
7.	\$
8.	\$

What is the total amount your claim for all items above? \$ _____

Signature of Claimant or Authorized Representative: _____

Please Print Name _____

VERIFICATION

STATE OF _____

COUNTY OF _____

Before me, a Notary Public in and for said state and county, personally appeared the person whose name is signed above who being made known to me and being duly sworn to give true testimony, affirmed that all of the above stated facts are true and correct.

Sworn and subscribed before me this _____ day of _____, 20 _____

AFFIX SEAL

Signature of Notary Public _____

Printed Name _____