



CITY OF MELROSE  
OFFICE OF THE CITY CLERK

Kristin Foote  
City Clerk

562 Main Street  
Melrose, Massachusetts 02176  
Telephone - (781) 979-4114  
Fax - (781) 979-4149

## CITY OF MELROSE CLAIM FORM

Claim	
Amount of Claim	\$

1. Claimant's Name:		
2. Claimant's address:		
3. Claimant's phone number:		
4. Claimant's email address		
5. Nature of Claim:		
6. Date and time of incident:		
7. Exact location of incident:		
8. Circumstances of incident:		
9. Photos of the damage and cause of damage (please attach):	Yes	No
10. Have you contacted your insurance company:	Yes	No
11. Name of insurance co/phone number:		
12. Police report (please attach):	Yes	No
13. Estimate for repair (please attach):	Yes	No
14. Name of repair co/phone number:		



CITY OF MELROSE  
OFFICE OF THE CITY CLERK

Kristin Foote  
City Clerk

562 Main Street  
Melrose, Massachusetts 02176  
Telephone - (781) 979-4114  
Fax - (781) 979-4149

## **CLAIM REIMBURSEMENT INSTRUCTIONS**

Please note that claims for injuries or damages from a street or sidewalk defect must be received by the City within 30 days of the incident (M.G.L. c. 84). Any other negligence-based claims generally must be received by the City within 2 years of the incident (M.G.L. c. 258). For further information, Massachusetts General Laws are located on the State Legislature's website at <http://www.mass.gov/legis/laws/mgl/index.htm>.

Claims must be filed **in person** prior to the statute of limitation. Your claim will be forwarded to the Insurance Agency (see below). Please understand that the Insurance Agency requires sufficient time to complete the investigation of your claim.

### **Filing a claim:**

1. Complete the entire claim form. Include a thorough description of the incident, the exact location and the time and date.
2. Please include any photos and police reports.
3. Include receipts/estimates to repair the damage
4. Bring the paperwork to the Melrose City Clerk's office for submission

The Office of the City Clerk has no further involvement in the claims process once the claim has been filed and forwarded to the Insurance Agency. Direct all subsequent questions and concerns to:

**LaRovere Insurance Agency**  
**492 Broadway Everett, MA 02149**  
**617-387-9700**

**City of Melrose City Solicitors Office**  
**781-979-4183**