

Application for

Liability Incident Form



sustainable thriving achieving

East Dunbartonshire Council

www.eastdunbarton.gov.uk

Please note, you can complete this form on your computer or alternatively, print and complete in ink using block capitals. Failure to complete the form accurately may result in a delay or claim not being processed.

Please complete all sections of the form including where applicable the exact location of the accident, a sketch showing the appropriate landmarks, e.g. the nearest lighting column number, house number, bus stop or shop etc. For pedestrians please state clearly whether the incident happened on the footway, footpath or crossing the carriageway.

Persons completing this form are advised that the Council's insurers are responsible for decisions on legal liability.

Please return the Completed form to:

Gallagher Bassett
Wentworth House
Turnberry Park Road
Gildersome,
Morley,
Leeds
LS27 7LE

Or electronically with all supporting information to:

Uk.stirling.edcclaims@gbtpa.com

Gallagher Bassett / EDC Use Only

| | |
|--------------|--|
| GB Reference | |
|--------------|--|

1. Your Contact Details

| | | | |
|------------------|--|---------------|--|
| Name | | | |
| Address | | | |
| Postcode | | | |
| Telephone Number | | Email Address | |

2. Incident Details

| | | | | |
|--|-------|--|------|--|
| When did the incident occur? | Date: | | Time | |
| Where did the incident occur? (Please indicate road name and nearest house address, nearest street lighting column number or nearest physical landmark) | | | | |

| | |
|--|--|
| <p>Please describe what happened and use the space provided in Section 6 of this form to give a sketch of the incident location</p> <p>(Photographic evidence can also be of great assistance)</p> | |
|--|--|

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|------------------------------------|
| 3. Damaged Property Details |
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|--|--|
| <p>Please give details of damage to property, state costs involved and provide some evidence i.e. invoices, quotes or receipts</p> | |
|--|--|

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|--------------------------|
| 4. Injury Details |
|--------------------------|

| | |
|--|--|
| <p>Please give details of any injury sustained and if possible provide some form of medical evidence</p> | |
|--|--|

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|-----------------------------------|
| 5. Witness Contact Details |
|-----------------------------------|

| | |
|-----------------------|--|
| First Witness | |
| Name | |
| Address | |
| Postcode | |
| Telephone Number | |
| Email | |
| Second Witness | |
| Name | |
| Address | |
| Postcode | |

To the best of my knowledge the above particulars are correct

Signed _____

Date _____

National Fraud Initiative

This authority is under a duty to protect the public funds it administers, and to this end will use the information you have provided on this form for the prevention and detection of fraud. It will also share this information with other bodies responsible for auditing or administering public funds for these purposes.

For further information, see the NFI guidance on the council's website or contact the Council's key NFI contact being the Council's Audit & Risk Manager.

Data Protection Act 1998

The information provided on this form will be processed by East Dunbartonshire Council in accordance with the Data Protection Act 1998. The data you provide will be used for administering your application liability claim. While your claim will be treated in confidence, your personal information will be passed to our insurers who will assess your claim.

Other Formats & Translations

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Corporate Communications Team at 12 Strathkelvin Place, Kirkintilloch, G66 1TJ, tel 0300 123 4510

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ براہ مہربانی فون نمبر 0300 123 4510 پر رابطہ کریں۔

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਫੋਨ ਕਰੋ।

Gabhaidh an sgriobhainn seo cur gu Gàidhlig ma tha sin a dhith oirbh. Cuiribh fòin gu 0300 123 4510

अनुरोध करने पर यह दस्तावेज हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फोन कीजिए।

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