



Jennifer Wilson
Mayor

Erin Litvack
Deputy Mayor, County Services

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Deputy Mayor, Finance and
Administration

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Deputy Mayor, Regional
Operations

Andrew Roberts
Chief of Staff

NOTICE OF CLAIM

Send to:
SLCoRiskReporting@SaltLakeCounty.gov
and
ClerkClaims@SaltLakeCounty.gov

PROCEDURE FOR FILING A CLAIM:

If you have been injured or sustained property damage and believe Salt Lake County is legally responsible, you or your legal representative must properly and timely file a Notice of Claim Form (NOC) with Salt Lake County in Compliance with the Utah Governmental Immunity Act.

The NOC must be dated and signed by the individual making the claim or their legal representative. The NOC must contain you or your legal representative's original signature (copies or facsimiles are not acceptable). The NOC shall set forth: (i) a brief statement of the facts; (ii) the nature of the claim asserted; (iii) the damages incurred by the claimant so far as the damages are known; and (iv) if the claim is being pursued against a governmental employee individually as provided in Utah Code § 63G-7-202(3)(c), the name of the employee.

Salt Lake County requests that any claim also be accompanied by relevant evidence such as police reports, witness statements, photographs, bids or estimates, and similar materials.

To file your completed NOC you must deliver, mail, or email the NOC to:

DELIVER/MAIL:

LANNIE CHAPMAN
COUNTY CLERK
SALT LAKE COUNTY
2001 S STATE STREET STE S2 200
SALT LAKE CITY UT 84190-1050

OR

EMAIL:

CLERKCLAIMS@SALTLAKECOUNTY.GOV
AND
SLCORISKREPORTING@SALTLAKECOUNTY.GOV

Upon receiving a properly filed NOC, you will be sent an acknowledgment letter. If you have questions about the process, please call (385) 468-7777.

This summary procedure set out above does not waive any provision of the Utah Governmental Immunity Act. UTAH CODE ANN. § 63G-7-101

**Salt Lake County
Government Center**
2001 South State Street,
Suite N-2100
Salt Lake City, UT
84114-4575

Tel: 385.468.7000
www.saltlakecounty.gov



SALT LAKE COUNTY

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NOTICE OF CLAIM FORM

Signature is required. Unsigned NOCs will not be processed. UTAH CODE ANN. § 63G-7-401

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Date of Loss: _____ Time of Incident: _____

Loss Location: _____

Vehicle Information (if applicable): _____
(Year) (Make) (Model)

Description of Incident: _____

(Use additional sheets if needed.)

Property Damage: _____

Bodily Injuries: _____

(Claimant Name Printed) **Required**

(Relationship to Claimant)

(Claimant Signature) **Required**

(Date Signed)