

Small Claims Form

Important Note: The Council will only investigate claims where this form has been fully completed and all supporting documentation is enclosed. PLEASE USE BLOCK CAPITALS.

1. CLAIMANT DETAILS

Full Name and Address*

**Please complete*

Telephone Number:

Email Address:

***Mandatory**

2. ACCIDENT DETAILS

Exact location of accident:

**Site location map/photos to be provided*

- See note 2 overleaf.

Date of Accident:

Time of Accident:

Description of Accident:

(Please provide a short summary of the incident which occurred)

Was Accident reported to Council? Tick Yes / No

If yes please provide full name of the official
Involved and the date notified:

Was Accident reported to the Gardai? Tick Yes / No

If yes please provide full name of the Garda
Involved and the Garda Station notified:

Were there any witness(es)? Tick Yes / No

If yes please provide full name, Address and
Telephone number of witness(es)

3. WHERE ACCIDENT RELATES TO A MOTOR VEHICLE

Make and Model of Vehicle:

Motor Tax Expiry Date:

Vehicle Registration:

Date of NCT:

Insurance Company Details:

(Including Policy Number)

Value of alleged damage to vehicle:

**Invoice/Receipt to be provided - see note 3 overleaf.*

SIGNED: _____

DATE: _____

Notes:

1. Please allow a minimum of 8 weeks for investigation of claim.
2. A site map and photos showing the exact location of the incident are required in order to investigate your claim. (If you know the Eircode and GPS co-ordinates you can provide these also). Photos of the damage to your vehicle are also required. Please submit any other photos that may have to show cause of damage for example potholes.
3. Original invoice(s)/receipt(s) in respect of repairs carried out to your vehicle must be submitted to process your claim.

Small Claims Form Checklist

- ✓ Fully Completed Small Claims Form, signed & dated
 - ✓ Photo's of the Eircode and/or GPS co-ordinates of location where the incident occurred
 - ✓ Photos of the damage to your vehicle or property
 - ✓ Photos that show cause of damage for example potholes
 - ✓ Original invoice(s)/receipt(s) in respect of repairs, showing a breakdown of charges, including vemc (environmental) charge
4. We may share personal data provided to us in the context of the claims resolution process with our Insurers, IPB Insurance (IPB). IPB is committed to protecting your personal information. IPB is a data controller and is required to comply with the Data Protection Acts 1988 - 2018 and the General Data Protection Regulation. The information that you provide ('data'), if shared with IPB, will be used for the administration of your policy and/ or any claims made on the policy. Data is at all times treated as confidential and the appropriate measures are taken to ensure it is secure. A copy of IPB's Data Protection Notice can be found on IPB's website www.ipb.ie. The notice explains why IPB collects and uses your data, who IPB shares your data with, your data protection rights, how long IPB retains your data for, where your data is located and what to do if you have any data protection complaints. If you would like to receive a copy of the Data Protection Notice you can email dpo@ipb.ie or write to IPB Insurance, 1 Grand Canal Square, Grand Canal Harbour, Dublin D02 P820.
5. As a result of the Covid-19 Virus, we are sending all written communications by email only. This is to reduce inter personal contact and to avoid any business disruption issues that might arise. We ask that you please adopt the same approach in your written communication with this office for the foreseeable future.
