

CITY OF NORMAN
POST OFFICE BOX 370
NORMAN, OKLAHOMA 73070

NOTICE OF TORT CLAIM

CLAIMANT: Hoyt HALLFORD JR DATE: 10-26-2023

ADDRESS: 10650 E Post Oak Rd CITY Noble

STATE: OK ZIP: 73068 PHONE: (H) 405 401 7431 (W) —

DATE OF INCIDENT: 10-19-2023

LOCATION OF INCIDENT: Hyway 9

STATEMENT OF CIRCUMSTANCES / REASONS YOU BELIEVE CITY IS LIABLE:

officer started U TURN without checking
Traffic

(use additional pages if necessary)

MONETARY STATEMENT: List of expenses claimed for payment:

<u>see att.</u>	\$	_____	\$	_____
<u>RENTAL CAR</u>	\$	<u>Tbd</u>	\$	_____
_____	\$	_____	\$	_____

TOTAL AMOUNT CLAIMED: \$ _____

NAME AND ADDRESS OF INSURANCE COMPANY: _____

AGENT: _____

THIS FORM MUST BE SIGNED AND RETURNED WITH ALL REQUESTED INFORMATION IN ORDER TO BE PROCESSED.

I SWEAR AND/OR AFFIRM THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT.

Hoyt Hallford Jr
CLAIMANT'S SIGNATURE

FILED IN THE OFFICE
OF THE CITY CLERK
ON 10/26/23-xw