



Truckee Carson Irrigation District Damage Claim Form

Damage claims must be filed with the District Office within 30 calendar days of the incident.

Name (Please Print): _____ Date: _____ Initials: _____

Property
Owner's Name

(Please Print): _____

Property
Address (include
lateral and takeout):

Phone Number:	Cell Phone:	
Damage Date:	Estimated Damages:	

Sherriff/Police
Report
Number:

Fire Department Report Number:

Email:

Damage Description:

Give a full description damaged property, extent of damage, and location of damage. Attach all documents to verify claim, invoices, canceled checks, estimates from contractors etc.

Requested Repairs:

Property Owner's
Signature: _____

Date: _____

Signing this form is acknowledgement of the damages listed. No changes or alterations will be accepted after this date.

**Date Report
Received by TCID:**

**Signature of staff
receiving report:**

