LIMITED ACCESS HIGHWAY INCIDENT CLAIM FORM

Revised 4/2002

STATE OF CONNECTICUT COMMISSION ON FIRE PREVENTION and CONTROL 34 PERIMETER RD WINDSOR LOCKS CT 06096-1069

Batch #	
# of Claims _	

Office Use Only

TELEPHONE # (860)627-6363 x257 (In State) Toll Free 877-528-3473

INSTRUCTIONS: 1. Claim must be filed with the Commission at the above address within 60 days of the incident date.

- 2. Form must be completely filled out. Incomplete forms will be returned to the Fire Company.
- 3. Copies of Incident Reports will not be forwarded to the Department of Public Safety Office of Education and Data Management.
- 4. Information supplied should be consistent with each filing (example Fire Company name).

CONDITIONS OF PAYMENT: 'The State Fire Administrator shall pay to each Volunteer Fire Company for each call to which it responds on any limited access highway, or on that section of the highway known as the Berlin Turnpike... or on that section of Route 8 in Beacon Falls which is within the boundaries of the Naugatuck State Forest, the sum of one hundred dollars; provided, in relation to the Berlin Turnpike as herein described, such sum shall be payable only in respect to fires involving motor vehicles using the Turnpike.'—(excerpt, C.G.S. Sec. 13A-248).

If different than location, whose address? Reason for difference Check if payments are to be made out to and sent to the Town Treasurer (If box is not checked, payments will be out to and sent to the Fire Company) Date of Incident Time of Incident City / Town Highway involved Location City / Town What was reported: Single Vehicle Accident Multi-Vehicle Accident Brush Fire Medical Emergency Structure Fire Other
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Medical Emergency Structure Fire Other Description
Description
Vehicle Identification Year Make Model Color License Plate # State VIN # # of Occupants 1
3
4
Has the Incident been reported to the State Fire Marshal? Yes No Don't Know
If Yes, enter FD ID # Incident#