

UC Irvine

Claim Form (Non-Vehicle)

Use this form for reporting **non-vehicle-related claims**. Submit completed forms to [ServiceNow](#). If you have questions on how to file, see our [Claims Management](#) page, "How to File a Claim".

Information about incident

Date of Incident:

Time of Incident:

Location of Incident:

Describe what happened:

Describe the damage or injury:

If property damage occurred, please describe the property that was damaged:

If anybody was injured, please provide their contact information:

Injured person's name:

Injured person's phone #:

Injured person's address:

Injured person's email:

Please provide contact information for witnesses, if available (if more than one witness, please include additional witness contact information in ServiceNow Description field):

Witness's name:

Witness's phone #:

Witness's address:

Witness's email:

Supporting documents (please check all that apply and attach to attach to ServiceNow (look for paperclip icon) request.

Photo Repair Estimates Invoice Diagrams Police Report# Other

Form submitted by:

Submitter's name:

Submitter's phone#:

UC employee # (if applicable):

Submitter's email:

Date submitted: