



JWF Specialty Company  
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Indianapolis, IN 46240-0996  
(317) 706 – 9500 *phone*  
(317) 574 – 7863 *fax*  
(888) 349 – 6165 *toll free*

## Ohio Municipal Joint Self-Insurance Pool Notice of Occurrence / Claim

<b>Pool Member</b>	<b>Date of Occurrence</b> / /
<b>Contact</b> Name: Phone Number: (    )    -	<b>Location of Occurrence</b>

<b>Description of Occurrence / Accident</b>
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<b>Describe Damage</b>
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<b>Describe Property Involved (If Auto, Year, Make, Model)</b>			
Name of Owner:			
Address:			
City:	State:	Zip:	
Phone Number: (    )    -			

<b>Pool Member's Driver</b>			
Name:			
Address:			
City:	State:	Zip:	
Phone Number: (    )    -			

<b>Other Driver</b>			
Name:			
Address:			
City:	State:	Zip:	
Phone Number: (    )    -			

<b>Witness</b>			
Name:			
Address:			
City:	State:	Zip:	
Phone Number: (    )    -			