

STATE OF COLORADO
NOTICE TO ATTORNEY GENERAL

C.R.S 24-10-101, et seq.

24-10-109, (in part) 3(a)

- (1) Any person claiming to have suffered an injury by a public entity or an employee thereof while in the course of such employment shall file a written notice as provided in this section within 182 days after the date of the discovery of the injury. . .
- (2) If the claim is against the State or an employee thereof, the notice shall be filed with the attorney general. . . **Such notice shall be effective upon mailing by registered or certified mail, return receipt requested, or upon personal service.**

ADDRESS: COLORADO DEPARTMENT OF LAW
CIVIL LITIGATION AND EMPLOYMENT LAW SECTION
TORT LITIGATION UNIT
RALPH L. CARR COLORADO JUDICIAL CENTER
1300 BROADWAY, 10TH FLOOR
DENVER, CO 80203

*

Date format: MM/DD/YYYY

_____ NAME OF CLAIMANT		_____ CONTACT PHONE	
_____ ADDRESS	_____ CITY	_____ STATE	_____ ZIP CODE
_____ EMAIL ADDRESS		_____ DATE OF BIRTH	
_____ STATE AGENCY INVOLVED		_____ STATE EMPLOYEE(S) INVOLVED	
_____ DATE OF OCCURRENCE / TIME OF DAY	_____ CITY / COUNTY	_____ LOCATION (see instructions)	
_____ DESCRIPTION OF OCCURRENCE			
_____ DESCRIPTION OF INJURIES/DAMAGES/LOSSES			
_____ \$ AMOUNT CLAIMED			

I certify that the foregoing statements made by me are true.

CLAIMANT SIGNATURE

DATE

RETURN ORIGINAL TO ATTORNEY GENERAL. MAINTAIN A COPY FOR YOUR PERSONAL RECORDS.
ATTACH COPIES OF ANY SUPPORTING DOCUMENTS. PROCESSING TIME MAY TAKE UP TO 8 WEEKS.

State Office of Risk Management

Claim Process & Instructions

To file a claim with the State of Colorado, you must:

1. Complete the attached form and return it to the address listed at the top of the page. You may fill in the form on line, but you must print out the form in order to send it to the Attorney General's Office (AGO). Please use the arrow keys to navigate through the fields in the form. Do not use the enter key.
2. Provide as much detail as possible about the incident, especially the location where it happened; e.g. highway traveling on, direction traveling, lane traveling in, mile marker or nearest exit, streets at a specific intersection, city, county, or nearest landmark. Please provide an approximate dollar amount of damages.
3. After your claim has been received at the Attorney General's Office for filing, it will be forwarded to the State Office of Risk Management. An insurance adjuster will be assigned to investigate your claim.
4. If any further information or documentation is needed from you, the adjuster will contact you. Investigation of your claim may take an additional 4 - 6 weeks from the time you mail your form to the AGO.
5. Once liability has been established, the insurance adjuster will contact you by phone or mail, depending on the nature of your incident.
 - If your claim is denied you will receive a letter in the mail.
 - If the State accepts liability, an Adjuster will contact you for estimates and send a release for payment. A check will be mailed to you approximately 2 weeks from the date you send the signed release to the Adjuster.
6. You may visit the State Office of Risk Management (SORM) website at www.colorado.gov/dhr/liability-claims to check on the status of your claim or call SORM at 303-866-3848 (Denver Metro Area) or 1800-268-8092 (outside Denver Metro Area).

Please note: The total estimated time to complete the claim process is 6 – 8 weeks.

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