

**CITY OF CRANSTON**

**POTHOLE ACCIDENT REPORT**

As part of our investigation, we would appreciate it if you would complete this form and return it to the address listed below. If you believe the City was responsible for your damages, please attach you itemized repair bill, a copy of the vehicle registration, and any photos showing the pothole and the surrounding area.

City of Cranston  
City Clerk's Office Room 207  
869 Park Avenue  
Cranston, RI 02910

Name and address of the vehicle owner: \_\_\_\_\_

Date of accident: \_\_\_\_\_ Time: \_\_\_\_\_ Weather conditions: \_\_\_\_\_

Exact location of the pothole: \_\_\_\_\_

Describe the vehicle involved: Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Odometer reading: \_\_\_\_\_ VIN: \_\_\_\_\_ Registration: \_\_\_\_\_

Was a Police report filed? \_\_\_\_\_

Describe in detail how the incident occurred (use back of this form if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What relief/payment are you seeking? \_\_\_\_\_

\_\_\_\_\_  
Signature of vehicle owner

\_\_\_\_\_  
Print name of vehicle owner

Date of this report: \_\_\_\_\_

If you have any questions regarding this form, please contact Susan Ayrassian at 780-3207