



**ATTENTION: MEMBER OF THE
SOUTH DAKOTA PUBLIC ASSURANCE ALLIANCE**

STEPS TO FOLLOW WHEN FILING A CLAIM

1. The Member must either complete the appropriate **PROPERTY or LIABILITY** claim notice and email, fax or mail to:

CLAIMS ASSOCIATES, INC.
PO BOX 1898
SIOUX FALLS SD 57101
FAX: 605-333-9835

SDPAAclaims@claimsassoc.com

2. If a party notifies the Member of the intent to pursue a claim, it is the responsibility of the party seeking to make a claim to complete the **CLAIMANT REPORT NOTICE** form which complies with the following South Dakota Law:

SDCL 3-21-2 Notice prerequisite to action for damages – Time Limit. No action for the recovery of damages for personal injury, property damage, error or omission or death caused by a public entity or its employees may be maintained against the public entity or its employees unless written notice of the time, place and cause of the injury is given to the public entity as provided by this chapter within 180 days after the injury.

SDCL 3-21-3 Persons to whom notice must be given. Notice shall be given to the attorney general and the following officers as applicable:

- *In the case of a county, to the county auditor;*
- *In the case of a municipality, to the mayor or city finance officer;*
- *In the case of other public entities, to the chief executive officer or secretary of the governing board.*

3. The completed **CLAIMANT REPORT NOTICE** is to be kept by the Member, and a copy of the notice immediately forwarded to Claims Associates, Inc. The Member should complete a Liability Claim Notice which should accompany the Claimant Report Notice. Upon receipt of this claim form, Claims Associates will conduct a thorough investigation and report our findings and recommendations to the Member.