

City of Minden

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Personal Property Damages Claim Form

Name _____

Address _____

Phone # _____

Date when damages occurred _____

Address where damages occurred _____

Damaged property (must attached photos of damaged property) _____

Description of Damages _____

Repairs Estimate or Actual Cost: (must attach one of the following)

- Contractor’s estimate to repair damages
- Estimated cost of materials to fix it yourself
- Receipts for materials

Signature _____ Date _____