

LAW OFFICES
OF
PATRICK J. MADDEN, LLC

204 GLENWOOD AVE.
HADDONFIELD, NJ
08033-0389
PHONE 609-413-5635



CERTIFIED BY THE SUPREME
COURT OF NEW JERSEY AS A
CIVIL TRIAL ATTORNEY

MEMO

TO: Members, School Pool for Excess Liability Limits Joint Insurance Fund (SPELLJIF), Atlantic and Cape May Counties Association of School Business Officials Joint Insurance Fund (ACCASBO JIF), Burlington County Insurance Pool Joint Insurance Fund (BCIP JIF), Gloucester, Cumberland, Salem School Districts Joint Insurance Fund (GCSSD JIF)

FROM: Patrick J. Madden, Esq.

DATE: February 23, 2022

RE: Proposed Revisions to Tort Claim Form

We recently updated our Tort Claim Action Checklist. See, <https://www.spelljif.com/wp-content/uploads/TCA-checklist.pdf>

Part of our recommended procedure for the handling of Tort Claims is the transmission of a Tort Claim Form to the claimant, and the SPELL JIF website provides a form for each Member's adoption.

Utilization of a Tort Claim Form (a questionnaire which seeks details and information related to the claim beyond that required by the Tort Claims Act) serves two important functions. One, it provides us with additional facts necessary for an adequate investigation into claims. Two, a claimant's failure to complete and return the Tort Claim Form can operate as a bar from their pursuit of a complaint.

As part of my general review and update of our legal documents, I have revised the Tort Claim Form, and I am providing the proposed revisions for your review and comment.

The highlights:

- Requests additional personal information of the claimant, i.e., driver's license number and email address.
- Requests additional employment information, as well as education information for minor claimants.

- Requests identification of all communications with representatives of the district, and copies of same if recorded.
- Broadens the request for “photographs” to include video and audio.
- Broadens request for “X-Rays” to other radiologic studies.
- Requests identification of family physician, and authorization for family physician records.
- Inclusion of a prior claim question, for other bodily injury, workers compensation claims, and the like.

I would appreciate it if you would review the proposed revisions and provide me with any of your thoughts, comments or questions. I would also appreciate any of your input regarding your past use of the Tort Claims Form, and any suggestions related to both the form itself and any of the processes related to the use of the form.

Once the revisions to the Form have been finalized, each Member will be required to adopt a Resolution implementing the use of the Form, and I will provide each Member with a form resolution as well as an explanatory memo for presentation to your individual boards.

Thanks very much, and I look forward to your comments.