

Confidential under sections 24(25) and/or (32) of the Act on the Openness of Government Activities

## Application for damages

### Personal data

Name	Personal identity code
Address	
Bank account number and name of account owner (for payment of possible compensation)	Telephone number
<p>I am (tick the correct option)</p> <p><input type="checkbox"/> A client/patient</p> <p><input type="checkbox"/> A Siun sote employee</p> <p><input type="checkbox"/> A family member/guardian/legal guardian*, own name and telephone number:</p>	
<p>* A continuing power of attorney or power of attorney is required as an attachment to the application.</p>	

### Incident involving injury or damage

Specification of the claim for damage to property or personal injury	Compensation claimed (€)
Department/operating unit/location where the incident occurred	
Date and time of suspected incident	

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Description of the incident	
(A report on the incident continues)	
Date, signature and name in block letters*	
*A form delivered by post <sup>1)</sup> must be dated and signed by hand.	
Form delivery address <sup>1)</sup>	Received (Registry office fills in)
Kirjaamo North Karelia wellbeing services county - Siun SOTE Tikkamäentie 16 80210 Joensuu	

The wellbeing services county is liable under Chapter 3 of the Tort Liability Act if a person the county employs causes material damage to the patient due to error or neglect. The wellbeing services county's liability requires that there is a causal link between the error or negligence and damage to or loss of property. The claim for damages and the related documents are confidential (Chapter 6, section 24 of the Act on the Openness of Government Activities and the Deputy Chancellor of Justice, 7 February 2005)

<sup>1)</sup>You can send the request directly to the wellbeing services county's registry using the electronic form at <https://miunpalvelut.fi/>. The use of the service requires identification.