

)	
)	
)	
Plaintiff,)	CIVIL ACTION NO. 23-CV-00067
)	
v.)	
)	
BROOKS COUNTY)	
)	
)	
Defendant.)	

If you believe that you may be entitled to a refund of fire protection fees (“Fire Fees”) paid as a result of a resolution in the above referenced class action (the “Lawsuit”) but your name is not listed as a Class Member on the Settlement Webpage at **SchreckFireFeesSettlement.com**, you need to complete this Claim Form **within forty-five (45) days from the date the individual refund calculations are posted on the Settlement Webpage.**

**Terry D. Turner, Jr.
Gentle Turner & Benson, LLC
Schreck Fire Fees Settlement
501 Riverchase Parkway East
Suite 100
Hoover, Alabama 35244**

The Administrator will review your Claim Form and respond to you with his findings. **You will have fifteen (15) days to object to the Administrator's findings.** Objections will be considered and ruled upon by the Special Master appointed by the Court. **The Special Master's ruling is final and binding.**

PERSONAL IDENTIFICATION

Please Type or Print

Name:
Current Address: Street Address: _____ _____ City: _____ State: _____ Zip Code: _____
Address or Parcel Number for which you believe a refund is owed: Street Address: _____ _____ City: _____ State: _____ Zip Code: _____ Parcel No.: _____
Area Code and Phone number (day):
Area Code and Phone number (evening):
Email:

If you need additional space, attach the required information on separate, numbered sheets in the same format as above and print your name at the top of each additional sheet.

YEARS FOR WHICH YOU BELIEVE YOU ARE ENTITLED TO A REFUND

Please list all of the tax years for which you believe you are entitled to a refund:

_____.

SUPPORTING DOCUMENTATION

You may attach to this Claim Form any documentation that you believe supports your claim that you are entitled to a refund. Make sure each page of such documentation is clearly labeled with your name.

CERTIFICATION

I/We certify that I/we currently or formerly own(ed) and paid Fire Fees for the property located at (fill in address of property for which you believe a refund is due)

_____.

I/We declare and affirm under penalties of perjury that the foregoing information contained herein and documents attached here to, if any, are true, correct and complete to the best of my/our knowledge, information and belief, and that this Claim Form was executed this _____ day of _____, 20__.

Signature of Property Owner

Signature of Joint Property Owner, if any

(Print your name here)

(Print your name here)