ROBERT R. SIMONS
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Member New Jersey
and Pennsylvania Bars

Certified by the Supreme
Court of New Jersey as
a Criminal Trial Attorney

July 11, 2012

Bergen County Correctional Facility
Justice Center
10 Main St.
Hackensack, NJ 07601-7681

Bergen County Prosecutor's Office
160 South River Street
Hackensack, New Jersey 07601

County of Bergen
One Bergen County Plaza
Hackensack, NJ 07601

Borough of Waldwick
63 Franklin Turnpike
Waldwick, NJ 07463

Waldwick Police Department
63 Franklin Turnpike
Waldwick, NJ 07463

Waldwick Police
Sergeant Frank Paccione
63 Franklin Turnpike
Waldwick, NJ 07463

Waldwick Police Officer Wright
63 Franklin Turnpike
Waldwick, NJ 07463

Waldwick Police Officer Zuzeck
63 Franklin Turnpike
Waldwick, NJ 07463

RE: Michael J. Simons
Tort Claim Notice

Dear Madam/Sir:

Enclosed please find a tort claim notice in regards to my client, Michael J. Simons. Thank you for your attention to this matter.

Very truly yours,

ROBERT R. SIMONS, JR.

RRS/jn
Encl.

CLAIM FORM - FOR DAMAGES AGAINST: Office of the Attorney General, Bergen County Prosecutor's Office, County of Bergen, Borough of Waldwick; Waldwick Police Department; Waldwick Police Sgt. Frank Paccione, Waldwick Police Officer Wright and Waldwick Police Officer Zuzeck

1. State the Name(s) and post office address(s) of Claimant(s).

Michael J. Simons
34 Wanamaker Avenue
Waldwick, New Jersey 07463

Social Security Number of Claimant(s) 137-80-9676

Date of Birth of Claimant(s) 05-21-1971

2. State the postal mailing address to which correspondence and notices concerning this claim should be sent (such as claimant's attorney's name and mailing address).

Robert R. Simons, Jr., Esquire
126 White Horse Pike
Haddon Heights, NJ 08035

3. Regarding the occurrence, transaction or accident which gave rise to this claim, set forth:

(a) Month-Day-Year it occurred:

Arrested and charged on	April 13, 2012
Released from Custody	April 17, 2012
Time of day it occurred:	Time of Arrest: 6:35 p.m. on April 13, 2012 Time of Assault: approximately 2:00 a.m. on April 14, 2012

(b) Location or place it occurred including street address, if known, and city or town:

Wanamaker Avenue in Waldwick, New Jersey
AND
Bergen County Correctional Facility
160 South River Street
Hackensack, New Jersey 07601

The location of the alleged crime was: **Waldwick, N.J. and Hackensack, N.J.**

(c) The circumstances (what happened):

Mr. Simons was arrested, charged, searched, and seized without probable cause by the Waldwick Police on Wanamaker Avenue in Waldwick, New Jersey. While incarcerated for five days in Bergen County jail, he was physically assaulted by an inmate.

4. Injury, damage or loss.

(a) Type of injury, damage, or loss:

Bodily Injury; Medical expenses; Income Loss; Violation of Civil Rights, Mental Anguish.

(b) Give a general description of the injury, damage or loss incurred known as of this date:

To be provided.

5. State the name(s) of the party or parties, including the State of New Jersey, whom you believe caused the injury, damage or loss and the name or names of any employee(s) of the State of New Jersey whom you believe caused the injury, damage or loss.

Office of the Attorney General; Bergen County Prosecutor's Office; County of Bergen; Borough of Waldwick; Waldwick Police Department; Waldwick Police Sgt. Frank Paccione; Waldwick Police Officer Wright; and Waldwick Police Officer Zuzeck.

6. (a) State the amount claimed as of this date, including the estimated amount of any prospective (future) injury, damage or loss presently known. Unknown at this time.

(b) Set forth the basis of the computation of the amount stated in 6(a). Unknown at this time.

7. Attach hereto true copies of written reports of claimant's or claimant's attending physicians or dentists. To be provided.

8. List claimant's expert witnesses and attach true copies of their reports or statements relating to the claim. To be provided.

9. Attach true copies of claimant's itemized bills for medical, dental or hospital expenses incurred or itemized receipts of payment for such expenses. To be provided.

10. Attach documentary evidence showing amounts of any income loss, including profits or commissions. To be provided.

11. If future treatment is necessary, provide a statement of anticipated expenses for each treatment. To be provided.

12. Regarding the reports and documents requested in 7-10, the reports or documents (check where appropriate):

7. To be supplied.
8. To be supplied.
9. To be supplied.
10. To be supplied.

13. Name (s) of person (s) preparing this claim form.

Robert R. Simons, Jr., Esquire

I, Robert R. Simons, Jr., Esquire, certify that I am of full age and that the statements made by me in support of the claim against the State of New Jersey/Borough of Waldwick are true and that the reports and documents submitted are genuine to the best of my knowledge and belief.

Dated: July 11, 2012

By: 

Robert R. Simons, Jr., Esquire