



<i>For CSM Use Only</i>
Filing Date:
TC #:

**TEST CLAIM FORM AND TEST CLAIM AMENDMENT FORM** (Pursuant to Government Code section 17500 et seq. and Title 2, California Code of Regulations, section 1181.1 et seq.)

**Section 1**

Proposed Test Claim Title:

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**Section 2**

Local Government (Local Agency/School District) Name:

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Name and Title of Claimant's Authorized Official pursuant to [CCR, tit.2, § 1183.1\(a\)\(1-5\)](#):

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Street Address, City, State, and Zip:

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Telephone Number

Email Address

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**Section 3 – Claimant designates the following person to act as its sole representative in this test claim. All correspondence and communications regarding this claim shall be sent to this representative. Any change in representation must be authorized by the claimant in writing, and e-filed with the Commission on State Mandates. ([CCR, tit.2, § 1183.1\(b\)\(1-5\)](#).)**

Name and Title of Claimant Representative:

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Organization:

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Street Address, City, State, Zip:

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Telephone Number

Email Address

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**Section 5 – Written Narrative:**

- Includes a statement that actual or estimated costs exceed one thousand dollars (\$1,000). ([Gov. Code § 17564.](#))
- Includes all of the following elements for each statute or executive order alleged **pursuant to [Government Code section 17553\(b\)\(1\)](#)**:
- Identifies all sections of statutes or executive orders and the effective date and register number of regulations alleged to contain a mandate, including a detailed description of the *new* activities and costs that arise from the alleged mandate and the existing activities and costs that are *modified* by the alleged mandate;
- Identifies *actual* increased costs incurred by the claimant during the fiscal year for which the claim was filed to implement the alleged mandate;
- Identifies *actual or estimated* annual costs that will be incurred by the claimant to implement the alleged mandate during the fiscal year immediately following the fiscal year for which the claim was filed;
- Contains a statewide cost estimate of increased costs that all local agencies or school districts will incur to implement the alleged mandate during the fiscal year immediately following the fiscal year for which the claim was filed;

Following FY: \_\_\_\_\_ - \_\_\_\_\_ Total Costs: \_\_\_\_\_

Identifies all dedicated funding sources for this program;  
State: \_\_\_\_\_

Federal: \_\_\_\_\_

Local agency's general purpose funds: \_\_\_\_\_

Other nonlocal agency funds: \_\_\_\_\_

Fee authority to offset costs: \_\_\_\_\_

Identifies prior mandate determinations made by the Board of Control or the Commission on State Mandates that may be related to the alleged mandate: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Identifies any legislatively determined mandates that are on, or that may be related to, the same statute or executive order: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 6 – The Written Narrative Shall be Supported with Declarations Under Penalty of Perjury Pursuant to [Government Code Section 17553\(b\)\(2\)](#) and [California Code of Regulations, title 2, section 1187.5](#), as follows:**

- Declarations of actual or estimated increased costs that will be incurred by the claimant to implement the alleged mandate.
- Declarations identifying all local, state, or federal funds, and fee authority that may be used to offset the increased costs that will be incurred by the claimant to implement the alleged mandate, including direct and indirect costs.
- Declarations describing new activities performed to implement specified provisions of the new statute or executive order alleged to impose a reimbursable state-mandated program (specific references shall be made to chapters, articles, sections, or page numbers alleged to impose a reimbursable state-mandated program).
- If applicable, declarations describing the period of reimbursement and payments received for full reimbursement of costs for a legislatively determined mandate pursuant to [Government Code section 17573](#), and the authority to file a test claim pursuant to paragraph (1) of subdivision (c) of [Government Code section 17574](#).
- The declarations are signed under penalty of perjury, based on the declarant's personal knowledge, information, or belief, by persons who are authorized and competent to do so.

**Section 7 – The Written Narrative Shall be Supported with Copies of the Following Documentation Pursuant to [Government Code section 17553\(b\)\(3\)](#) and [California Code of Regulations, title 2, § 1187.5](#):**

- The test claim statute that includes the bill number, and/or executive order identified by its effective date and register number (if a regulation), alleged to impose or impact a mandate. Pages \_\_\_\_\_ to \_\_\_\_\_.
- Relevant portions of state constitutional provisions, federal statutes, and executive orders that may impact the alleged mandate. Pages \_\_\_\_\_ to \_\_\_\_\_.
- Administrative decisions and court decisions cited in the narrative. (Published court decisions arising from a state mandate determination by the Board of Control or the Commission are exempt from this requirement.) Pages \_\_\_\_\_ to \_\_\_\_\_.
- Evidence to support any written representation of fact. *Hearsay evidence may be used for the purpose of supplementing or explaining other evidence but shall not be sufficient in itself to support a finding unless it would be admissible over objection in civil actions.* ([Cal. Code Regs., tit. 2, § 1187.5](#).) Pages \_\_\_\_\_ to \_\_\_\_\_.

**Section 8 – TEST CLAIM CERTIFICATION Pursuant to [Government Code section 17553](#)**

- The test claim form is signed and dated at the end of the document, under penalty of perjury by the eligible claimant, with the declaration that the test claim is true and complete to the best of the declarant's personal knowledge, information, or belief.

*Read, sign, and date this section. Test claims that are not signed by authorized claimant officials pursuant to [California Code of Regulations, title 2, section 1183.1\(a\)\(1-5\)](#) will be returned as incomplete. In addition, please note that this form also serves to designate a claimant representative for the matter (if desired) and for that reason may only be signed by an authorized local government official as defined in [section 1183.1\(a\)\(1-5\)](#) of the Commission's regulations, and not by the representative.*

This test claim alleges the existence of a reimbursable state-mandated program within the meaning of [article XIII B, section 6 of the California Constitution](#) and [Government Code section 17514](#). I hereby declare, under penalty of perjury under the laws of the State of California, that the information in this test claim is true and complete to the best of my own personal knowledge, information, or belief. All representations of fact are supported by documentary or testimonial evidence and are submitted in accordance with the Commission's regulations. ([Cal. Code Regs., tit.2, §§ 1183.1](#) and [1187.5](#).)

\_\_\_\_\_  
**Name of Authorized Local Government Official**  
pursuant to [Cal. Code Regs., tit.2, § 1183.1\(a\)\(1-5\)](#)

\_\_\_\_\_  
**Print or Type Title**

\_\_\_\_\_  
**Signature of Authorized Local Government Official**  
pursuant to [Cal. Code Regs., tit.2, § 1183.1\(a\)\(1-5\)](#)