



SEWER OVERFLOW OR BACKUP

LETTER TO RESIDENT

Dear Citizen:

The Grand Traverse County DPW regrets that you have experienced a sewer system disposal event. We strongly urge you to check with your homeowner's insurance policy to see if coverage is provided.

It is the property owner's responsibility to use reasonable precautions and protect the damaged property and take all necessary steps to reduce further damage. If you feel a health hazard exists, enclosed is written material to use as a guide in dealing with certain items.

Current Michigan Law, Public Act 170 of 1964, as amended by Public Act 222 of 2001, requires that persons seeking compensation for personal injury or property damage must show that all of the following existed at the time of the event:

- The Grand Traverse DPW, at the time of the event owned or operated, or directly or indirectly, discharged into, the portion of the sewage disposal system that allegedly caused the damage or injury.
- The sewage disposal system of the Grand Traverse County DPW had a construction, design, maintenance, operation or repair defect.
- The Grand Traverse County DPW knew, or in the exercise of reasonable diligence, should have known about the defect and failed to take reasonable steps in a reasonable amount of time to repair, correct or remedy the defect.
- The defect must be 50% or more the cause of the event and the damage or injury.

You are also required to comply with the written notice requirements of the Act. Any claim you make must be submitted in writing to the Grand Traverse County DPW within 45 days after the date the damage or physical injury was discovered or should have been discovered. The written notice must contain your full name, address, telephone number, the address of the affected property, the date of discovery of any property damage or physical injury, and a brief description of the claim. Please use the forms enclosed to report your claim.

Grand Traverse County DPW field employees are not permitted to authorize repairs, cleanup or replacement of damaged items. All authorization must be made by the designated officials of the Grand Traverse County DPW. Representatives can be contacted at 231-995-6039 between the hours of 8:00 a.m. and 5:00 p.m., Monday – Friday.



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NOTICE OF CLAIM

This *Notice of Claim* form must be completed in full and filed with the governmental agency against which you wish to make a claim for property damage or physical injury resulting from a sewage disposal system event. Michigan law requires that you file this written notification within 45 days after the damage or physical injury was discovered, or in the exercise of reasonable diligence, should have been discovered.

If you fail to file your *Notice of Claim* in a timely manner, your claim will be denied.

NAME: _____

ADDRESS: _____

PHONE: _____

DATE OF LOSS: _____ DATE LOSS DISCOVERED: _____

DESCRIPTION OF SEWER BACKUP: _____

DESCRIPTION OF PROPERTY DAMAGE: _____

PERSONAL INJURY YES NO; If Yes, please attach medical evidence/confirmation of injury

PLEASE ATTACH DOCUMENTATION REGARDING COST ASSOCIATED WITH CLEANUP, REPAIR OR REPLACEMENT OF PERSON PROPERTY RELATED TO THIS SEWER EVENT.

PLEASE RETURN THIS FORM TO:

Grand Traverse County DPW
John Divozzo, Director
2650 LaFranier Road
Traverse City, MI 49686

DPW Use Only

Date Received: _____

Claim Receipt Form Attached