

Village of Roscommon  
Sewer Back Up Claim Form  
Information

The following information is provided pursuant to Public Act 222 of 2001.

Section 19 (1) of the Act states, "(T)o facilitate compliance with this section, a governmental agency owning or operating a sewage disposal system must make available public information about the provision of notice under this section."

If you experience an over flow or back up of our sewage disposal system, and you feel that you may have a claim for damages as a result of that back up you must file the attached Notice of Claim for Sewer Backup with the Village Manager. The claim must be filed within **45 days** after the overflow or back up was discovered or when in the excise of reasonable diligence the back up or over low should have been discovered. The written notice must contain the following information that is required by Section 19 (2) (c) of the Act, or recovery of damages may be barred.

- the claimant's name, address, and telephone number
- the address of the affected property
- the date of discovery of any property damages or physical injuries
- a brief description of the claim

A copy of Act 222 of 2001 may be obtained at this website.

<http://www.legislature.mi.gov/documents/2001-2002/publicact/pdf/2001-PA-0222.pdf>

Claims should be mailed or delivered to: Allen Lowe, Manager  
Village of Roscommon  
214 South Main Street  
Roscommon, MI 48653

Please be sure to provide as much information and documentation of your claim as possible. Dated pictures may also be helpful.

The information that you provide will be sent to our insurance carrier. Under our policy, the carrier retains the right to accept or reject claims under the provisions of Michigan law. Should your claim be rejected by the carrier, you may appeal to the Village Council by notifying the Village Manager.

Village of Roscommon  
Sewer Back Up Claim Form  
Notice of Claim of Sewer Back Up

To make a claim for damages or physical injury arising from a sewage disposal system event, all claimants **MUST** provide the following information.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address of Affected Property

(if different) \_\_\_\_\_

Date of Discovery of Damage: \_\_\_\_\_

Describe Damages or Physical Injuries:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach other information and documents as may be necessary to support your claim.

Return this form to:

Allen Lowe, Manager  
Village of Roscommon  
214 South Main Street  
Roscommon, MI 48653

An individual that has been injured or has suffered property damage as a result of a Sewage Disposal Event **MUST** provide written notice of the event within 45 days after the date the damage or injury was, or in exercise of reasonable diligence should have been discovered. Failure to provide proper notice will bar your claim.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---

FOR OFFICIAL USE ONLY!

Date Received: \_\_\_\_\_

Forwarded to: \_\_\_\_\_

Date: \_\_\_\_\_

Forwarded to: \_\_\_\_\_

Date: \_\_\_\_\_

Forwarded to: \_\_\_\_\_

Date: \_\_\_\_\_