

LWMMI

League of Wisconsin Municipalities Mutual Insurance

NO FAULT SEWER BACKUP COVERAGE INFORMATION FOR MUNICIPAL CLERKS/CLAIMANTS

Directors
David De Angelis
Village Administrator
Village of Elm Grove

Ron Hayward
Village President
Village of West Milwaukee

John Rusch
Administrator
City of Tomah

Mark Dahlberg
Village President
Village of Grantsburg

Wallace Thiel
Village Administrator
Village of Hartland

Dan Thompson
Executive Director
League of Wisconsin
Municipalities

Director
Dennis Tweedale
Chief Executive Officer
League of Wisconsin
Municipalities
Mutual Insurance

402 Gammon Place
Suite 225
Madison, WI 53719

608.833.9595 p
608.833.8088 f
dennis@lwmmi.org



What Is Covered: There may be limited coverage under the municipal's insurance policy to honor ACV (actual cash value) damages to a home or business caused by the back up of untreated sewage from the sewer main line into a lateral (the sewer pipe from the home/business to the main line in the street). Losses are adjusted on a depreciated value basis if the homeowner or business owners policy has no or inadequate coverage.

What Is Not Covered:

1. Flood Damage
2. Surface water run off damage
3. Infiltration into the basement from saturated ground
4. Any damage to land

What the Claimant Should Do – Identify/Mitigate Damages:

1. Photograph all damages.
2. Construct an inventory of all damage, including the age of the property if possible.
3. Get it cleaned up. Claimants have a duty to mitigate their damages. Claimants need to clean up the sewage/water as soon as possible and can submit supports of damage (receipts, invoices, inventories) for the municipalities insurance carrier to review and consider.
4. Contact the claimant's homeowner's insurance carrier and submit a claim to that carrier for claimant's damages.
5. Send a written notice of a potential claim to the Municipal Clerk. Complete claim form.
6. The municipality will not process a claim unless they have notice of coverage or denial from the claimant's home/business insurer. Claimant must provide documentation of this from their carrier.
7. Allow the municipality or its insurance representative to do a preliminary assessment of the damaged area.

What Should The Municipal Clerk Do:

1. Contact the Sewer Utility to determine that a sewer backup in the main line at the claimant's property had occurred.
2. Send a completed claim form to Midwest Claims.

When Midwest Claims Receives a Loss Notice – They Will

Midwest Claims Service will assign a field adjuster to contact the claimant and make an appointment to view the alleged damages, and/or the claimants supporting documentation.

How Much Might The Claimant Expect To Receive:

Municipal clerks can not make any commitments to claimants regarding the payment of any sewer backup claims. Clerks can advise claimants that an investigation of damages is ongoing and given the scope of this loss and the amount of individuals who sustained damages it could be some time before payment can be determined. There is a limited amount of coverage for "No Fault" claims. Payments may be less than actual damages and pro rated among all claimants.

PHONE NUMBER FOR MUNICIPAL CLERKS AND CLAIMANTS:

If a claimant (who has already filed a sewer backup claim with the municipality and that claim has been submitted to Midwest Claims Service) poses a question that the clerk cannot answer, please direct that question or the claimant to Midwest Claims Service: 1-800-225-6561.



Midwest Claims Service

24 Hour Telephone: 800-225-6561
FAX 248-371-3091
E-Mail claims@midwestclaims.com

NOTICE OF:

- CLAIM (Submitted for consideration of payment)
- INCIDENT NOTICE (Record of purpose — may develop into claim)

Date Reported: _____		Policy Number: <u>13191</u>		Policy Term: <u>1/1/09 - 1/1/10</u>			
Reported By: <u>Julee Helt</u>		Phone #: <u>608-850-2827</u>		Fax #: <u>608-849-5628</u>			
Title/Position: <u>Village Clerk</u>		e-mail Address: <u>jhelt@vil.waunakee.wi.us</u>					
INSURED: <u>Village of Waunakee</u>							
Contact Person: <u>Julee Helt</u>		Title/Position: <u>Village Clerk</u>					
Address: <u>500 W. Main St. Waunakee, WI 53597</u>		Phone #: <u>608-850-2827</u>					
e-mail Address: <u>jhelt@vil.waunakee.wi.us</u>		Fax #: <u>608-849-5628</u>					
COVERAGE TYPE: <input checked="" type="checkbox"/> GENERAL LIABILITY <input type="checkbox"/> POLICE LIABILITY <input type="checkbox"/> PUBLIC OFFICIALS LIABILITY <input type="checkbox"/> AUTO <input type="checkbox"/> PROPERTY <input type="checkbox"/> BOILER & MACHINERY							
LOSS INFORMATION — DESCRIBE HOW LOSS OCCURRED:							
ATTACH ADDITIONAL COPIES AS NEEDED							
REPORTED TO (POLICE OR FIRE DEPT.)				REPORT #			
LOCATION OF CLAIM/INCIDENT		DATE OF CLAIM/INCIDENT	TIME	DATE INSURED NOTIFIED			
				<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.			
INSURED VEHICLE— AUTO LOSS INFORMATION							
VEH. NO.	YEAR, MAKE, MODEL		V.I.N. (VEHICLE IDENTIFICATION)		PLATE NO.		
DRIVER'S NAME			RESIDENCE PHONE (A/C No.)	BUSINESS PHONE (A/C, No., Ext.)			
DESCRIBE DAMAGE		DATE OF BIRTH	DRIVER'S LICENSE NUMBER		PURPOSE OF USE		
		ESTIMATE AMOUNT	WHERE CAN VEHICLE BE SEEN?				
INSURED PROPERTY LOSS INFORMATION							
LOCATION OF LOSS			POLICE OR FIRE DEPT. TO WHICH REPORTED				
KIND OF LOSS (Fire, Wind, Explosion, Etc.)			PROBABLE AMOUNT ENTIRE LOSS				
DESCRIPTION OF LOSS & DAMAGE (Use reverse side, if necessary)							
PROPERTY OF OTHERS- LOSS INFORMATION							
DESCRIBE PROPERTY (If auto, year, make, model, plate no.)			OTHER VEH/PROP. INS?	COMPANY OR AGENCY NAME & POLICY NO.			
			<input type="checkbox"/> YES <input type="checkbox"/> NO				
OWNER'S NAME & ADDRESS			BUSINESS PHONE (A/C, No., Ext.)	RESIDENCE PHONE (A/C, No.)			
DESCRIBE DAMAGE	ESTIMATE AMOUNT	WHERE CAN DAMAGE BE SEEN?					
INJURED							
NAME & ADDRESS		PHONE (A/C, No.)	PED	INS. VEH.	OTHER VEH.	AGE	EXTENT OF INJURY
WITNESSES							
NAME & ADDRESS			BUSINESS PHONE (A/C, No., Ext.)	RESIDENCE PHONE (A/C, No.)			

FORWARD THIS REPORT TO MIDWEST CLAIMS SERVICE, 1700 Opdyke Court, Auburn Hills, Michigan 48326. If a loss involves bodily injury or major property damage, please contact MIDWEST CLAIMS SERVICE at 1-800-225-6561. We will take the loss information from you and investigate as necessary. The information we will need will closely follow this form so you may use it as a guideline. If you do not have complete information, do not delay in reporting. Details will be determined during the investigation. PLEASE REPORT DIRECTLY AND PROMPTLY.