



# City of Grand Haven

## SEWER BACKUP INSURANCE CLAIM INFORMATION

RE: Sewer Backup Claims

Dear Property Owner:

I am very sorry to hear of your sewer backup. Please do what you need to do to get the mess cleaned up.

The City's insurance policy is for costs in excess of your homeowner's policy. Please file a claim with your homeowner's carrier at your earliest convenience. By doing so, you will be a step ahead of the game as this will be the first thing our insurance adjuster will request compliance with. Your homeowner's policy will have to respond first and then our policy would be secondary. **If found liable**, the City's policy would pay for expenses above your homeowner's policy.

After you have completed and returned the enclosed claim form, I will forward it to our insurance agency. If you have any photos or receipts you may also include them with your claim form.

Unfortunately, I cannot determine coverage. Each claim has its own merits and only an adjuster can review/interpret policy language and review claim details to determine coverage. If you have any other questions or concerns, please feel free to contact me at (616) 847-4886.

Sincerely,

Linda L. Browand, CMC  
City Clerk  
City of Grand Haven

## SEWER BACKUP LOSS NOTICE

Grand Haven City Clerk's Office  
Attn: Linda L. Browand, City Clerk  
519 Washington Avenue  
Grand Haven MI 49417

RETURN COMPLETED FORM TO:

**General Information:**

Date of Loss: \_\_\_\_\_ Location of Loss: \_\_\_\_\_ Authority Contacted: \_\_\_\_\_

Description of Accident/Loss (*What happened*): \_\_\_\_\_

Weather conditions day of accident & physical description of accident site (*icy, cracked sidewalk, dry etc*):

**Property Damage Information:**

Name & Address (*Property Owner*): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

**Property Damage Only**

Describe Property (*type, model etc.*): \_\_\_\_\_

Where can property be seen: \_\_\_\_\_

**NOTE: WE WILL NEED A COPY OF YOUR HOMEOWNERS DECLARATION POLICY**

**Witnesses:**

<u>Name &amp; Address</u>	<u>Home Phone #</u>	<u>Work Phone #</u>
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**Comments:**

**Reported By:**

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

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