

City of Mt. Pleasant, Division of Public Works
1303 N. Franklin Street, Mt. Pleasant, Michigan 48858
SEWAGE DISPOSAL or STORM WATER SYSTEM EVENT
NOTICE OF CLAIM

This *Notice of Claim* form must be completed in full, and filed with the City of Mt. Pleasant to make a claim for property damage or personal injury resulting from a sewage disposal or storm water 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* timely, your claim will be denied.

NAME: _____

ADDRESS: _____

TELEPHONE: _____

DATE OF LOSS: _____ DATE LOSS DISCOVERED: _____

ADDRESS OF DAMAGED PROPERTY: _____
(If different from above)

OWNER OF DAMAGED PROPERTY: _____
(If different from above)

DESCRIPTION OF SEWER BACKUP: _____

DESCRIPTION OF DAMAGE TO BUILDING
AND/OR PERSONAL PROPERTY: _____

DESCRIPTION OF ANY PERSONAL INJURIES: _____

RETURN THIS FORM TO: **Robert Murphy, Street Superintendent**
City of Mt. Pleasant, D.P.W.
1303 N. Franklin Street
Mt. Pleasant, Michigan 48858

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Municipal Office Use Only

Date Received: _____

Action Taken: _____

[Form186-G] _____