

**CITY OF MT. PLEASANT – DIVISION OF PUBLIC WORKS
SANITARY SEWER 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 the *Notice of Claim* timely, your claim will be denied.

Name: _____

Address: _____

Phone: _____

Date of Loss or Injury: _____

Date Loss or Injury Discovered: _____

Address of Damaged Property: _____
(if different than above)

Owner of Damaged Property: _____
(if different than above)

Description of Sewer Backup: _____

Description of Damage to Building
and/or Personal Property: _____

Description of Personal Injury: _____

**Return this form to: City of Mt. Pleasant – Division of Public Works
 320 W. Broadway St.
 Mt. Pleasant, MI 48858**

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Municipal Use Only:

Date Received: _____