

APPLICATION FOR EXPEDITED REIMBURSEMENT OF SEWAGE BACKUP



REQUIREMENTS

The applicant must have reported the incident via 311 or www.baltimorecity.gov/311-services. Once reported, completed applications with supporting documentation must be received within 90 days of the incident by the DPW Office of Legal and Regulatory Affairs (OLRA) at the address provided below. Applications not received within 90 days may be denied as untimely. No other communication(s) will be considered a request for reimbursement. You may fill out this application electronically or submit a hard copy by mail. Electronic submissions and use of email are entirely optional and are not required.

You must fill out all areas of this application and provide copies of all relevant supporting documentation before your application can be processed. Events prior to April 6, 2018 are not eligible for reimbursement.

Supporting Documentation

- If you are a tenant, you must provide a copy of your lease signed by the property owner of record. If you are acting on the owner or tenant's behalf, you must include proof of power of attorney.
- You must provide copies of all cleaning and disinfection receipts arising from the sewage backup expenses for which you request reimbursement. Reimbursement is limited to reasonable, documented expenses for cleanup and disinfection – it does not include property damage or related claims. Reimbursement is limited to \$5,000.00 per occurrence.

Claims must be submitted to the Baltimore City Law Department which makes all determinations of liability for claims filed against the City. For information regarding the general liability claims process, please visit the Law Department's website, law.baltimorecity.gov.

IMPORTANT INFORMATION FOR INSURED APPLICANTS

If your property is insured against sewage backups or equivalent events, you must receive a final, written determination from your insurance company before your application can be processed.

You must file this application within 90 days after the incident, but you may provide documentation from your insurance company up to 30 days after receipt from your insurer.

You must include all documentation provided to and received from your insurance company with your application, including proof of any deductible paid. Deductibles may be eligible for reimbursement, provided that the cost(s) incurred are demonstrably linked to cleanup/disinfection.

WHAT TO EXPECT FROM US

Applications will be processed within 60 days after receiving all necessary information and documentation in support of your application. If your application is missing necessary information or supporting documentation you will be notified.

If your application is eligible and all qualifying expenses are documented appropriately, you will receive a release for signature. The release must be signed and received at the address above before your check may be processed.



RETURN TO:

Baltimore City Department of Public Works
Office of Legal and Regulatory Affairs
Abel Wolman Municipal Building
200 Holliday Street
Baltimore, MD 21202

OR EMAIL

reimbursement@baltimorecity.gov

APPLICATION FOR EXPEDITED REIMBURSEMENT OF BUILDING BACKUP

Baltimore City Department of Public Works
Office of Legal and Regulatory Affairs

Abel Wolman Municipal Building
200 Holliday Street, Baltimore, MD 21202
reimbursement@baltimorecity.gov

Applicant's full name: _____

Service Address (including zip code): _____

Note - Service address is the street address of the affected property.

Mailing Address (if different): _____

Home Phone/Business Phone: _____ Email: _____

Date (month, day, year) of incident discovery: _____

Is the affected address residential? Yes No

Is your dwelling used exclusively as living quarters for a family, and does it contain permanently installed bathroom and kitchen facilities that are reserved for that family? Yes No

Are you the owner of the affected address? Yes No

Are you a tenant of the affected address? Yes No

Note - If you are a tenant, you must enclose a copy of your lease signed by the owner of record. If you are acting on the owner or tenant's behalf, you must enclose proof of power of attorney.

Total amount requested: _____

Note - Please enclose copies of all supporting documentation (receipts, invoices, photographs, billing statements, etc.). DPW cannot reimburse expenses that are not verified.

Do you have insurance to cover this loss? Yes No

Did you file a claim with your insurance company? Yes No N/A

Have you received a final determination from the insurance company? Yes No N/A

Note - Please enclose copies of all supporting documentation, including proof of any deductible paid and your insurance company's final determination (if available).

How did you hear about the Expedited Reimbursement Program? Online/Website _____

Community Meeting City Representative/Literature Social Media Word of Mouth Other

I do solemnly swear and affirm under penalty of perjury that the above representations are true and correct to the best of my knowledge. I understand that false statements constitute fraud and will be referred to the State's Attorney for prosecution.

SIGNATURE _____ DATE _____