

C-1

NOTICE OF CLAIM FORM

**ERIE COUNTY WATER AUTHORITY
 295 MAIN STREET - ROOM 350
 BUFFALO, NEW YORK 14203-2494
 (716) 849-8466**

Claimant(s) Name	MICHAEL SCANLON		
Address	3456 TRANSIT RD ORCHARD PARK	Cell Phone #	716- [REDACTED]
Email Address	[REDACTED] 14127	Home Phone #	716- [REDACTED]

Accident / Damage / Injury Location	3456 TRANSIT RD ORCHARD PARK NY 14127		
Date of Incident	5-18-23	Time of Incident	a.m. / p.m.
Police Contacted?	Yes / (No)	Police Report Taken?	Yes / (No)
Name of Police Agency	-		

PROPERTY DAMAGE CLAIMS ONLY N/A if not applicable

If this is not your property, give the name and address of the owner:

Name	-		
Address	-	Zip Code	-
Home Phone #	-	Work Phone #	-

PLEASE ATTACH ESTIMATES

Repair Estimates	\$ 281.12	\$
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PROPERTY DAMAGE AND PERSONAL INJURY WITNESSES

Name	-	Name	-
Address	-	Address	-
Phone	-	Phone	-

Attach copies of Medical bills once submitted to health insurance or automobile insurance.

ONLY PROVIDE COPIES OF THE MEDICAL BILLS. DO NOT PROVIDE MEDICAL RECORDS WITH THIS CLAIM FORM.

Claimant's Statement (please print legibly and be specific):

ON 5-18-23 THE WATER WAS SHUT OFF TO MOVE FIRE HYDRANTS DURING NYS DOT CONSTRUCTION PROJECT (SEE ATTACHED NOTICE). THE WATER WAS OFF FOR A PERIOD OF APPROXIMATELY 10 HOURS. WHEN THE SERVICE WAS RESTORED, I DISCOVERED DAMAGE TO AN INLINE CIRCULATION PUMP. A FITTING AT THE PUMP RUPTURED AND REQUIRED REPLACEMENT.

THE TECHNICIAN FROM WNY PLUMBING ATTRIBUTED THE DAMAGE TO THE WATER SHUT OFF. I AM CONTINUING TO MONITOR THE PUMP.

ADDITIONALLY, AFTER THE SHOT OFF WHEN THE WATER WAS RESTORED THE FAUCET IN A BATHROOM WAS DOWN TO A TRICKLE. I HAVE BEEN ABLE TO ABOLISH THE AERATOR RESTRICTION IN THE FAUCET.

ATTACHED ARE A COPY OF THE NOTICE OF WATER SERVICE INTERRUPTION AND THE REPAIR BILL.

All statements herein are made under penalty of perjury.

Add Additional Pages if necessary

Date: 6/13/2023

Michael Conner
Claimant's Signature

STATE OF NEW YORK)
COUNTY OF ERIE) ss:

On this 13th day of June 2023 before me personally appeared to me known, and known to me to be the same person described in and who executed the within instrument and he/she acknowledged to me that he/she executed the same.

KRISTINE M SAUTER
NOTARY PUBLIC STATE OF NEW YORK
ERIE COUNTY
LIC. #01SA6405194
COMM. EXP. 03/02/2024

Kristine M Sauter
Notary Public

3486 TRANSIT RD
ORCHARD PARK NY
14127

REGISTERED MAIL



RF 557 530 675 US

Label 200, August 2005

PSN 7690-03-000-9311

ERIE COUNTY WATER AUTHORITY
295 MAIN ST ROOM 356
ATT: CLAIM UNIT
BUFFALO, NY 14203

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ERIE COUNTY WATER AUTH
15 JUN 23 PM 1:23



RDC 99



14203

U.S. POSTAGE PAID
FCM LETTER
ORCHARD PARK, NY
14127
JUN 13, 23
AMOUNT

\$15.88

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