2019-049 – Moncalian, Gail

PROPERTY DAMAGE CLAIMANT STATEMENT CLAIMS REPRESENTATIVE / RISK MANAGER

ERIE COUNTY WATER AUTHORITY 295 Main Street – Room 350 BUFFALO, NEW YORK 14203-2494 (716) 849-8484 – TELEPHONE (716) 849-8463 - Fax

Property Damage Claim Checklist, (the following items must be included for your claim to be processed):

- 1 Insurance declaration page (If at fault, the Erie County Water Authority or our insurance company will reimburse for uncovered items such as your deductible)
- □ 2 Two written estimates
- 3 Evidence of any other amounts you are claiming

Please Print

Claimant Name	Gail Moncalian	Social Security #	
Address	Lakeview	Zip Code	14085
Home Phone #	, , , , , , , , , , , , , , , , , , , ,	Cell Work Phone #	

Accident / Damage	Location	6271 Ecki	hardt Rd, Lakeview,	NY 14085
Date of Incident	June	27,2019	Time of Incident	a.m./ p.m.
Police Contacted?		Yesy No	Police Report Taken?	Yes / No
If NO, why?		see atte	iched complaint	- # 7009

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

Name		
Address	Zip Code	
Home Phone #	Work Phone #	

	Repair Estimates	\$ 54:11 0	vaitine	\$	
			a mount tness(es), i		
Name	Bill F.		Name	Kevin 5	
Address	· · · ·		Address		
Phone			Phone		

2019-049 - Moncalian, Gail

Claimant's Statement (please be specific):

Morning of June 27 2019 a water break on Rte 5 The Major +looding sement. 11 TO OUT Vard and Com hrough DUY oro bags away 8 2MOI ever C.C.D coming gra this or WOG turner and we was Finally C 01 he in 11 at er (Use reverse side if necessary)

VERIFICATION

<u>Gail A. Moncalian</u> being duly sworn, deposes and says s/he is the Claimant in this action; that s/he has read the foregoing Notice of Intention to File a Claim and knows the contents thereof; that the same is true to the knowledge of deponent, except as to the matters therein stated to be alleged upon information and belief, and as to those matters s/he believe it to be true.

Claimant's Signature

Sworn to before me this 23 day of 2019 NING Notary Public

HEATHER A. MICHALAK NOTARY PUBLIC-STATE OF NEW YORK No. 01MI6325747 Qualified in Chautauqua County My Commission Expires June 01, 20<u>2</u>3

Date: 7/23/19

The yard started receding and the pumps started to empty the basement. At that time we could see the damage to our property. We recently had 10 truck loads of millings pit down on our back driveway (approximately Hoo' long by 12' wide) leading to our barn and they were washed away in the flood.

A claim has been filed with our insurance Company, NYCM. The claim number is, 5170. The adjuster is Brian to (716-' We have not settled yet with insurance company. We are still Waiting on some estimates. Our deductible is \$1000 as you can see on page 3 of our home owners declarations page.

I have communicated with Anthony Alessi at Erie County Water the day the flood occurred and informed him 2 weeks later I was still working on getting everything together and trying to get all the estimates.



Named Insured and Address

MARK E MONCALIAN GAIL A MONCALIAN

LAKE VIEW NY 14085-9531

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Agency Address

J D AGENCY LLC PO BOX 707 HAMBURG NY 14075

Transaction Reason Description

PER AGENT ADD HO 04 48 OTHER STRUCTURES ON THE RESIDENCE PREMISES INCREASED LIMITS THESE CHANGES HAVE RESULTED IN AN ADDITIONAL PREMIUM OF \$300.00, WHICH WILL BE REFLECTED IN YOUR REMAINING INSTALLMENT(S).

Insurance Provided By New York Central Mutual Fire Insurance Company

Policy Information

Policy Number		Transaction	ENDORSEMENT
Туре	HOMEOWNER	Transaction Effective	04/02/2019 12:01 AM EST
Inception Date	04/02/2017 12:01 AM EST	Transaction Expiration	04/02/2020 12:01 AM EST
Protected Since Date	04/02/2017 12:01 AM EST	Tier	1
Effective Date	04/02/2019 12:01 AM EST		
Expiration Date	04/02/2020 12:01 AM EST		
Term Length	12 MONTHS		

Agency Information

Name	J D AGENCY LLC	Office	716-312-7426
Code	05324	Fax	716-648-3441
Territory	1L	Email	jdagencyllc@aol.com
Paper Off	YES	Website	9674 1975 - 9674 1975-1
Direct Mail	YES		

Insured Summary

NAME	TYPE	MARITAL STATUS	GENDER
MARK E MONCALIAN	PRIMARY INSURED	MARRIED	MALE
GAIL A MONCALIAN	NAMED INSURED	MARRIED	FEMALE

Location Summary

NUMBER	ADDRESS		PREMIUM
1		LAKE VIEW, NY 14085-9531	

TOTAL PREMIUM



New York Central Mutual Fire Insurance Compa-1899 Central Plaza East, Edmeston NY 13335-1899 800-234-6926 www.nycm.com

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Coverage Information for Location 1 of 1

Location Address Information				
Street		County Code	029	
City	LAKE VIEW	County Name	ERIE	
State	NY	Sub County	9	
Zip	14085-9531			

Location Details

Construction Type	FRAME	Doublewide	N
Year Built	2004	# of Apartments	0
# of Families	1 FAMILY	# Units between Fire Walls	
Lead Abatement		Protection Class	4 - PROTECTED
Town/Row House	Ν	Fire District	LAKE VIEW FD
Secondary	NO	Feet to Hydrant	
Territory	357	Miles to Fire Department	01
Premium Group			

Coverage Information

Basic Form	NYC HO 10 - PREMIER PLUS HIGH VALUE PROTECTION POLICY
Inflation Protection Coverage	0.00%
	ADJUSTED UNDER XACTWARE APPRAISAL SYSTEM
Deductible	\$1,000
Seasonal Policy Number	

Coverage Details

COVERAGE	DESCRIPTION		LIMIT AMOUNT	PREMIUM
Coverage A	DWELLING	· · ·	408,000	
Coverage B	OTHER STRUCTURES		122,400	INCL.
Coverage C	PERSONAL PROPERTY		408,000	INCL.
Coverage D	LOSS OF USE		163,200	INCL.
Coverage E	PERSONAL LIABILITY	PER OCCURRENCE	1,000,000	
Coverage F	MEDICAL PAYMENTS TO OTHERS	PER PERSON	1,000	INCL.

Modifications and Credits Information

EDITION	DESCRIPTION	SAVINGS
05 18	AGE OF HOME DISCOUNT	\$102.00
05 08	ALARM SYSTEM	\$25.00
05 18	COUPLER	\$341.00
05 18	RETIREMENT DISCOUNT	\$51.00
	05 18 05 08 05 18	05 18AGE OF HOME DISCOUNT05 08ALARM SYSTEM05 18COUPLER

Surcharge Information

*** NO SURCHARGES EXIST FOR THIS LOCATION ***

TOTAL LOCATION PREMIUM



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Mortgagee Information

NAME/ADDRESS	 STATUS	LOAN NUMBER	ORDER
····	ACTIVE		1
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Detailed Form Information

NAME	EDITION	DETAILS	PREMIUN
NYC HO 10 05 18		PREMIER PLUS HIGH VALUE PROTECTION POLICY	
		COVERAGE DESCRIPTION	
		GUARANTEED REPLACEMENT COVERAGE ADJUSTED UNDER XACTWARE APPRAISAL SYSTEM	
HO 04 48	10 00	OTHER STRUCTURES ON THE RESIDENCE PREMISES - INCREASED LIMITS	
ana ,	n ngang tanàn mang tanàn ang taon	STRUGFURE TYPE	The second s
		BARN 100,000	
HO 24 93	05 02	WORKERS COMPENSATION CERTAIN RESIDENCE EMPLOYEES - NEW YORK	INCL
IL N 160	09 08	FLOOD FORM	INCL
NYC237	1106	INS SCORE NOTICE	INCL
NYC 211	8/91	IMPORTANT SENIOR CITIZEN INFORMATION	INCL
NYC HO 04 16	05 08	PROTECTIVE DEVICE CREDITS	INCL
		DISCOUNT DESCRIPTION PERCENTAGE	
		LOCAL FIRE ALARM 2%	· · · · ·
2		DEADBOLTS 2%	
NYC HO 219	05 18	HOMEOWNER QUICK REFERENCE GUIDE	INCL

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T	OWN OF	HAMBURG	POLICE DI		ят
Complaint#	7009	Date Receiv	ed: 06/27/20 ⁴	19	Source: E-911
Dispatch Code:	4614	Description: REF	ERRAL-PUBLIC U	TIL	Call Type:
Street:	LAKEVIEW	RD		Dispatch District	
Cross Street:	LAKE SHOR	ERD		Municipality: HAI	MBURG TOWN
Business:			125	Call Back:	
Times:	Arrived:	06/27/2019 06:59:46 06/27/2019 07:01:39 06/27/2019 12:30:52 06/27/2019 12:31:51			
Received By: Report (follow up):	F NICH	OLAS (815)	Dispatcher: F	ORDAN M (8	18)
Officers:	Name		Badge		
		IN T	006 058		
		MINDY L	224		
		SHUA T	061		
Disposition Codes:			1587-04 126-32		
	Patrol Handle	ed			
Associated Persons	•	4			x.
06/27/2019 07:0	0:03 ALL 8	SEVERE	WATER MAIN BR	AKE ON 5 WEST	OF LAKE VIEW
06/27/2019 07:0	2:45 ALL 8		UNTY WATER AU	THORITY NOTIFI	ED
06/27/2019 07:0		MM 5530			
06/27/2019 07:0	지 아내는 동안 그렇게 가슴이 들었다.		KAS WELL NFG	NOTIFIED	
06/27/2019 07:0			NE OPEN NOTIFIED OF W/B		NOSED
06/27/2019 07:0 06/27/2019 07:0					RD-FIRE DISPATCHED
06/27/2019 09:0	200000 000000 00 00	061			ER IN BASEMENT
06/27/2019 11:0		310 THM 30- alongside w/b rt 5 ii and NYS	e roadway with a ru mpacted with dama	pture gas main. St ge. Representative	arge water main break noulder and dirving lane of es from ecwa, national fuel e. Lanes to be restricted for
06/27/2019 12:2	2:15 THM (V REGISTRATION	DATA	
		Stat Sty Inspectio	te: Type: us: VALID Expirati le: EMPIRE Logo: on ID: 8769 Ex icle: 2012;NISSAN;	on: 2020-07-27 EMPIRE Legend: piration: 2019-10-3	
Printed Date: 7/1/20	019 10:21:26 4	M	·		Page # 1

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JOHN W. DANFORTH COMPANY

GENERAL CONTRACTORS FOR MECHANICAL SYSTEMS

Industrial Piping • Power Plants • Heating/Air Conditioning • Plumbing • Air and Water Pollution Control • Sheetmetal

July 16, 2019

Mark Moncalian

Lakeview, New York 14085

Attn: Mr. Moncalian RE: Water Heater Replacement

PROPOSAL

Scope of Work: We are pleased to submit our lump sum quotation including all Supervision, labor, materials and tools required to complete the work for the above referenced project.

Pricing Includes:

- o Furnish and install new 40 gallon power vent water heater
- Connect to existing venting
- Remove and dispose of existing water heater

Pricing Does Not Include:

- Any work not specifically detailed above;
- Electrical or control work of any kind
- Insulation

WE HEREBY PROPOSE TO FURNISH MATERIALS AND LABOR COMPLETE IN ACCORDANCE WITH THE SPECIFICATIONS ABOVE FOR THE SUM OF:

Alternate: - Install 50 gallon power vent water heater in lieu of 40 gallon - ADD \$150

Terms: Net 30 Days

JOHN W. DANFORTH COMPANY

Page 2

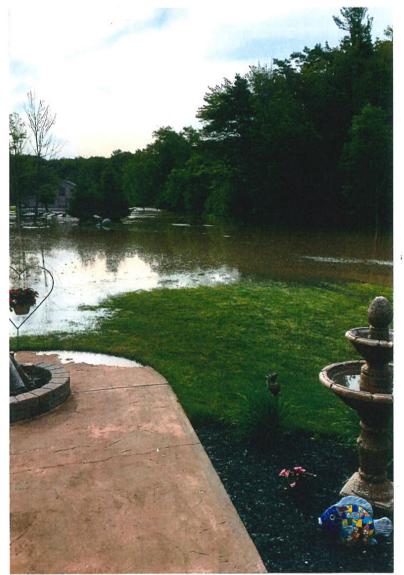
ACCEPTANCE OF PROPOSAL: The above prices, specifications, and conditions are satisfactory and are hereby accepted. You are authorized to do the work as indicated. Payment will be made as outlined above. The conditions above stand good for 30 days.

BY:	BY:	
Ryan S Project Manager	•	
DATE:	DATE:	
••		
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FRANK. P.T.L. HO 578-5	DME IMPROVEMENTS
	WORK PERFORMED AT:
GAIL MONCALIAN	LAKEVIEW
DATE YOUR WORK ORDER NO.	2ENT OUR BID NO.
DESCRIPTION OF	WORK PERFORMED
	OF SHELVES, AND AWAY F-ROM WALLS AGED PANELING,
REMOVE WATER QS SHEE	DAMAGED PANELING. TS)
OF BASEMENT.	18 INCHES OF ROUND PERIMETER (CUT OUT FROM E (ABOUT 200 FT)
INSTALL NEW	PANELING (25 SHEETS)
MOXE SHELVING WALLS REPLAC	E CONTENTS,
CLEAN UP AND DEBRI	
LABOR AND I	MATERIALS. 4400
All Material is guaranteed to be as specified, and the above work was per	ormed in accordance with the drawings and specifications provided for the
above work and was completed in a substantial workmanlike manner for	
This is a Partial Full invoice due and payable by:	Re
in accordance with our Agreement Proposal No.	Day Year Dated Day Year

11-12





Back driveway covered

*



Side of property

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Driving back to check on back barn

5**8**

<u>8</u>



Side property flowing toward neighbor's home and across the street.



Side of property



View of property

* *

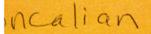
Rear of property covering back driveway.

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Side of driveway flowing across the street.

View of side half of property.



«view, NY 14085





14203

DO NOT BEND

Erie County Water Authority 295 Main Street - Room 350 Buffalo, NY 14203-2494

ROLE COUNTY WATER A