

## **SEWER / WATER MAIN APPLICATION FOR ASSISTANCE (NO-FAULT)**

Claims against Tooele City Corporation are governed by Utah's **Governmental Immunity Act**. However, Tooele City has an ordinance specifically designed to help persons who have suffered loss from a water or sewer main line break or backup—regardless of fault. **Important:** submitting a no-fault application will not satisfy the Notice of Claim requirements of the Governmental Immunity Act, and will not result in an examination of negligence or liability, i.e., “fault.” This form allows for financial assistance irrespective of fault.

### **WHAT TO DO**

In order to make an application under Tooele City's No-Fault Utilities Assistance Ordinance, you must do the following:

1. You must submit the application to the Tooele City Recorder (or may be emailed to both the Tooele City Recorder at [shilob@tooelecitey.gov](mailto:shilob@tooelecitey.gov) and to the Tooele City Attorney at [attorney@tooelecitey.gov](mailto:attorney@tooelecitey.gov)).
2. You must submit the application within thirty (30) days after the incident occurred.
3. You must submit the application in writing, give a full statement of the facts, and state the damages incurred. Attach any additional documents you would like.

Attached is a form which follows the criteria needed to make an application for no-fault financial assistance from Tooele City.

### **REASONS FOR NON-PAYMENT**

Even if you make a no-fault application with Tooele City, your application may be denied or reduced for the following reasons:

1. The application was not timely submitted.
2. The loss is fully or partially covered by private insurance.
3. The loss was caused by an irresponsible act of the Applicant, the Applicant's agent, or a member of the Applicant's household, or the Applicant did not cause the problem but failed to act responsibly to minimize the loss.
4. The loss is unsubstantiated, or verification of the loss is incomplete.
5. The loss exceeds the no-fault maximum of \$10,000 per incident.
6. Payment of no-fault assistance would exceed the amount allocated for the fiscal year in which the application is filed.
7. The Applicant is otherwise ineligible under the No-fault Utilities Assistance Ordinance.

**NO-FAULT UTILITY ASSISTANCE APPLICATION**

(In accordance with Tooele City Code Chapter §8-14)

**TO: TOOELE CITY RECORDER**

**DATE SUBMITTED:** \_\_\_\_\_

(Must be dated by City Recorder's Office)

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Home/Work/Cell): \_\_\_\_\_

Date of Incident: \_\_\_\_\_

Description of Incident (please be specific; attach additional explanations and/or documents if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Do you have Home Insurance?* ☐ Yes ☐ No.

*Have you contacted your insurance about this incident?* ☐ Yes. ☐ No.

*If so, will your insurance company cover the loss from this incident?* ☐ Yes. ☐ No. ☐ Partially.

*If your insurance company will not cover your loss, please state the reasons why:*

\_\_\_\_\_  
\_\_\_\_\_

Name of insurance company, contact, and agent: \_\_\_\_\_

Phone number of company, contact, and agent: \_\_\_\_\_

Description and Verification of Loss (please be specific; include estimates, receipts, appraisals, photos, videos, etc. to substantiate your loss; attach additional documentation as necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE READ:** I understand, by signing below, that my no-fault assistance application to Tooele City Corporation may be denied or reduced for the following reasons: (1) The application was not timely submitted; (2) The application is fully or partially covered by private insurance; (3) The loss was caused by an irresponsible act of the Applicant, or the Applicant failed to act responsibly to minimize the loss; (4) The loss is unsubstantiated, or verification of the loss is incomplete; (5) Payment of no-fault assistance would exceed the amount allocated for the fiscal year in which the application is filed.; (6) the Applicant is otherwise ineligible under the terms of the No-fault Utilities Assistance Ordinance.

\_\_\_\_\_  
Signature of Applicant

State of Utah

County of Tooele

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Signature