



REQUEST FOR COMPENSATION FORM

INTRODUCTION

Echelon Claims Services is an independent, third party that objectively assesses Council's liability when requests for compensation are made. If you are seeking compensation for loss or damage arising from an incident, which you believe has been caused by Council's negligence, Echelon Claims Services will investigate the incident to establish whether Council has any legal liability.

Most requests for compensation are below Council's excess and, therefore, are not covered by an insurance policy.

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ON COMPLETION OF	THIS FOR	RM, PLEA	ASE RETURN TO T	THE FOLI	_OWING AE	DRESS:			
Moorabool Shire Cound Attn: Governance PO BOX 18 BALLAN VIC 3342	cil								
Email: governance@m	nooraboo	l.vic.gov	<u>.au</u>						
FOR ANY QUERIES O	N THE CO	OMPLETI	ION OF THIS FORM	M PLEAS	E CONTAC	T ECHELO	N CLAIMS	S SERVICE	S:
Phone: (03) 9860 3413									
Please select the comp	ensation I	being sou	ıght:						
	PROPERTY DAMAGE					OR VEHICL	_E	OTHER	
CONTACT DETAILS									
Title:		MX	🗌 MR		IRS	□ MS	;		
Full Name:					I		I		
Address:									
Suburb:						State:		Postcode:	
Email:									
Telephone No:					Mobile:				
Do you wish for all corre	esponden	ce to be :	sent to you via ema	il?	÷	🗌 YES		□ NO	
AUTHORITY FOR AN A	AGENT T	O ACT							
If you wish for a third pa	arty to act	on your b	pehalf in this reques	st for com	pensation, p	olease sign	and comp	plete the follo	owing:
Ι			_, hereby authorise	Echelon	Claims Serv	vices to disc	uss my re	equest for	
compensation against N	Mooraboo	I Shire Co	ouncil with					, who	l
have instructed to act o	n my beh	alf.							
Please complete third p	arty conta	act details	s below;						
Name:									
Address:									
Suburb:						State:		Postcode:	
Email:							· I	I	
Phone Number:									
Signature:						Date:			

DATE AND TIME OF INCIDENT DETAILS							
Date of Incident:		Time of Incident:					
Have you notified Council of this incident before:		Date of first notification:					
WEATHER CONDITION	NS						
Conditions (E.g. Dry, W	indy, Raining, Sunny):						
LOCATION OF INCIDE	NT						
Address:							
Suburb:			State:		Postcode:		
	of the exact location with support lease provide a sketch to assist		learly dep	oict the a	rea in questi	on. lf	
PHOTOGRAPHS							
One of the most effective ways to avoid confusion about the circumstances surrounding your request for compensation is through the use of photographs. Without this information Council is unable to be sure it is investigating the correct issues. Please ensure that you only take photographs if it is safe to do so.							
You are required to provide a minimum of 3 photographs in support of your request for compensation.							

Your photographs need to show the following (where applicable):

The area of property that has sustained damage.

Area where a trip and fall occurred (Mark an 'x' on the exact tripping point)

The roots and/or trees that you allege have caused property damage.

Proof of injuries sustained.

 $\hfill\square$ A variety of shots and angles to clearly show the situation.

THE ROAD MANAGEMEN	IT ACT 2004						
Does your request for com of the roadway/footpath?	🗌 YES						
If YES, please be advised the provisions of the Road Management Act 2004 require an individual or company seeking compensation for property damage arising from the condition of the roadway/footpath, to pay the first \$1,640.00 of any claim (the "threshold amount") regardless of liability (includes motor vehicles, clothing, glasses etc).							
Does your request for com	T YES	□ NO					
Please note that the threshold amount is varied by the Victorian Government every financial year. The threshold amount stated above is valid for property damage occurring in the 2024/2025 financial year.							
See: http://www.austlii.edu.au/au/legis/vic/consol_act/rma2004138 for further information.							
INCIDENT DETAILS							
Please provide details of the incident and why you believe Council is liable. The request you are making is based in negligence, therefore, you need to provide clear evidence that the incident occurred due to Council's negligence. To state that Council is liable because 'it is their asset' or that 'the asset is on their land' is not sufficient for your request for compensation to be accepted.							
COMPENSATION SOUGH	ŧΤ						
You are required to attach	HT any supporting documentation to su repair quotes or invoice or receipt et		For property damage	e claims please			
You are required to attach provide a minimum of 2 x r	any supporting documentation to su	C.		e claims please			
You are required to attach provide a minimum of 2 x r	any supporting documentation to su repair quotes or invoice or receipt et	C.		e claims please			
You are required to attach provide a minimum of 2 x r	any supporting documentation to su epair quotes or invoice or receipt et of this information must not be seen	C.		e claims please			
You are required to attach provide a minimum of 2 x r Please Note: The request Amount: Please Note: you will be re	any supporting documentation to su epair quotes or invoice or receipt et of this information must not be seen	c. as an automatic acce ST Inclusive? f compensation sough	ptance of liability.				
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You are required to attach provide a minimum of 2 x r Please Note: The request of Amount: Please Note: you will be re assessed on their own men	any supporting documentation to su repair quotes or invoice or receipt et of this information must not be seen \$ Is the total G equired to substantiate the amount o rit and any payments made will com	as an automatic acce ST Inclusive? f compensation sough e from Council funds	ptance of liability.				
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You are required to attach provide a minimum of 2 x r Please Note: The request of Amount: Please Note: you will be re assessed on their own mer INSURANCE DETAILS – F Do you have Insurance? Have you claimed against If YES, please advise the of Insurance Provider: Claim / Policy Number:	any supporting documentation to surepair quotes or invoice or receipt et of this information must not be seen \$ Is the total G equired to substantiate the amount o rit and any payments made will com PLEASE COMPLETE WHERE APP your insurer? putcome of your claim:	as an automatic acce ST Inclusive? f compensation sough from Council funds LICABLE	ptance of liability.	□ NO npensation are □ NO □ NO			

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WITNESS - PLEASE BE A	ADVISED, WITNESS STATEMENTS	FROM FAMILY AND	FRIEND	S ARE NO	OT ACCEPTE	Ð	
Did anyone witness the inc	cident?		🗌 YES				
If YES, please provide thei	ir details:						
Contact Name:		Contact Number:					
E-mail:							
Address:			State:		Postcode:		
EVIDENCE							
In order to succeed in your request for compensation you will be required to establish that Council caused the alleged loss and/or damage through some form of negligence. In any public liability claim the burden of providing proof of negligence rests with you as the person seeking compensation. Neither Council nor Echelon Claims Services can assist you in this.							
Please explain any eviden	ce you are supplying:						
Is the evidence referenced	l attached to this document?		🗌 YES				
DISCLAIMER							
Completion and acceptance of this form does not represent an admission of liability on the part of Council and/or their insurers. Your request for compensation will be subject to investigation and the findings assessed on their own merits.							
Echelon Claims Services will endeavour to respond as quickly as possible. However, as all requests for compensation are assessed on their own merits, it can take some time to collate all the relevant information before we are in a position to make an accurate decision on liability. The process takes approximately eight weeks from the time Echelon receives your Request for Compensation Form. However, this timeframe can be longer due to delays in obtaining information and other factors beyond Council's control.							
Council complies with all its obligations under the provision of the Privacy and Data Protection Act 2014 and is committed to transparency and integrity in all its activities and programs. All information you supply is treated as private and confidential.							
Please Print Name:							
Signature:			Date:				
COUNCIL USE ONLY							
Council:	С	Council Reference:					
Received by:			Date:				
Council's notes for Echelor	n Claims Services:						



ECHELON AUSTRALIA PTY LTD - COLLECTION STATEMENT UNDER PRIVACY ACT 1988

In accordance with the Privacy Act 1988 (and subsequent amendments), we Echelon Claims Services, the trading name for Echelon Australia Pty Ltd (Echelon), which is an associated entity of JLT Risk Solutions Pty Ltd (JLT) and Marsh Pty Ltd (Marsh) and a business of Marsh McLennan (Echelon is also an Authorised Representative of JLT (AR no 000411224), draw your attention to the following:

- We may collect personal information about you by means of the enclosed document.
- We will only collect information from you that is relevant to the assessment of your claim.
- The information we collect may be disclosed to third parties, advisers, agents and JLT related Group companies but we will only do so for purposes of assessment of your claim.
- Your personal information may be sent to our administrative processing centres in Mumbai (India) or Kuala Lumpur (Malaysia) and to other JLT Group companies, insurers, reinsurers and other third party service providers (e.g. data storage providers) in the United Kingdom, Singapore, Hong Kong, the United States of America and elsewhere. We have a global IT infrastructure and data may be stored/sent/shared across different jurisdictions as a result.
- If you provide us with personal information about other individuals, you must ensure that those persons have been made aware
 of the above matters. Where the information collected relates to health, criminal record or other sensitive information as defined
 in the Privacy Act 1988, you must obtain it with the individual's consent. We will use and disclose your personal information in
 accordance with our Privacy Policy. You should only provide information to us that you are authorised to provide. We include this
 to cover a scenario where someone completes the form on behalf of a person who is incapable of completing the form
 themselves. This is a catch all to protect Echelon/JLT.
- By signing and submitting this form you consent to the information provided on this form being shared with third parties, such as lawyers or experts engaged in the defence of my claim, as relevant to the assessment and management of my claim

Our Privacy Policy can be accessed on our website <u>https://www.jltpublicsector.com/echelon-privacy-policy.html</u>. For further information contact Echelon Australia. E: claimsadmin@echelonaustralia.com.au

For further information regarding Echelon's Privacy Policy, contact the Privacy Officer for JLT and Echelon.

Echelon Australia Pty Ltd One International Towers, 100 Barangaroo Avenue Sydney NSW 2000, Australia

Echelon Australia Pty Ltd (ABN 96 085 720 056 AR: 411224) is a business of Marsh and McLennan