

Public Liability Incident Report

To be completed by the Claimant



SNOWY MONARO
REGIONAL COUNCIL

“Without Prejudice”

Thank you for reporting an incident to Council. Please be assured that the circumstances surrounding its occurrence will be investigated and that Council will take appropriate action. Please read the information below and if you wish to proceed with a claim against Council for loss or damage arising from the reported incident, complete the attached form and provide us with the information requested to ensure your claim is properly assessed.

The completed form should be sent to:

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| Organisational Risk Officer Snowy Monaro Regional Council | Postal: PO Box 714, COOMA NSW 2630 Email: council@snowymonaro.nsw.gov.au Fax: 02 6456 3337 |
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All claims will be considered on a “without Prejudice” basis. While Council sympathises with anyone suffering injury or sustaining loss, the acceptance of the completed incident notification form by the Council in no way infers negligence on the part of the Council or binds Council to provide compensation.

Notice to Potential Claimants

Before Council is obliged to pay compensation for any injury, loss or damage suffered, it must be established that this injury, loss or damage was caused through negligence on the part of Council, employees or agents of Council.

The proof required to establish negligence can be onerous and quite often you may be better served seeking compensation through your household, motor vehicle or medical insurance if you have it, as in most cases, proof of negligence will not be required. Should your insurance company then consider the Council to be negligent, it may seek reimbursement of its costs and any excess that you have paid from Council.

Particular consideration needs to be given to claims associated with roads and footpaths as the Civil Liability Act 2002 and amendments set out a number of principles to be employed in determining whether an authority has a “duty of care” or has “breached a duty of care” in Section 45 and 42 as stated below:

1. A roads authority is not liable in proceedings for harm arising from a failure of the authority to carry out road work, or to consider carrying out road work, unless at the time of the alleged failure the authority had actual knowledge of the particular risk the materialisation of which resulted in the harm
2. The functions required to be exercised by the authority are limited by the financial and other resources that are reasonably available to the authority for the purpose of exercising those functions.
3. The function required to be exercised by the authority are to be determined by reference to the broad range of its activities and not merely by reference to the matter to which the proceedings relate.

The same consideration needs to be given for injury, loss or damage being caused from trees or branches falling. While trees may be situated on nature strips or reserves that are Council owned, if there have been no prior reports of problems with the tree(s) in question and they have fallen and caused injury, loss or damage then other factors (e.g. disease, damage by a third party, severe weather etc) may need to be taken into consideration to determine if Council can be held liable for the injury or damage.

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SNOWY MONARO REGIONAL COUNCIL

Personal Details

Name of Claimant / Injured Person:

Date of Birth:

Gender: Male

Female

Address:

Town:

State:

Postcode:

Telephone:

Email:

Details of Injury, Loss or Damage

Incident Type: Property Damage Personal Injury Other _____

Date of Incident:

Time of Incident:

am/pm

Date Incident
Reported:

Name of Council
Officer to whom it
was reported:

Address / Location of Incident – distance and direction from nearest cross road, GPS Co-Ordinates etc

NOTE: When attaching maps / photographs, mark with an X the exact location of where the incident occurred. Without this information it may not be possible for Council Officers or our Insurer to investigate your claim.

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Please provide names and contact details of any witnesses present at the time of the incident:

| | |
|------|-------|
| Name | Phone |
| Name | Phone |

Describe the incident – how and where it occurred. If insufficient space please attach a separate sheet

| | |
|---|--|
| Do you regularly use the area where the incident occurred? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, how frequently? | |
| Have you previously notified Council of a problem related to this incident? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please provide details (including the date of your report): | |

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| Details of Injury, Loss or Damage <i>(e.g. broken windscreen, bruised leg etc. Please attach photographs to substantiate your claim)</i> | |
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| Have you attached a minimum of two quotes for the repair / replacement of damaged items? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If repairs have already been effected please attach a copy of the tax invoice. Is a copy attached? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
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| Person Injured | |
| If an injury occurred did the injured person require medical assistance? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please give details of doctors, medical centre or hospital attended: | |
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| Privacy |
| In completing this form, you will be providing “personal information” as defined under the Privacy and Personal Information Protection Act 2000. Snowy Monaro Shire Council is collecting this information for the purpose of assessing your claim against Council. This information will only be used for the purpose it was collected and will not be disclosed to any other organization that does not have any involvement in the claims management process, unless required to do so by law. |

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| Declaration and Signature of Applicant | |
| I declare that the information provided on this form and all other supporting documentation in relation to my claim, is to the best of my knowledge accurate, relevant and complete | |
| Signature | Date |
| | |

For further information or assistance on completing this form please contact Council:

PO Box 714 COOMA NSW 2630 | 1300 345 345 | council@snowymonaro.nsw.gov.au | www.snowymonaro.nsw.gov.au