



## 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.

## ON COMPLETION OF THIS FORM, PLEASE RETURN TO THE FOLLOWING ADDRESS:

East Gippsland Shire Council - Risk Management Team PO Box 1618
Bairnsdale VIC 3875
(03) 5153 9500

(03) 5153 9500 Email: <u>feedback@egipp</u>	s.vic.go	v.au							
FOR ANY QUERIES ON	THE CC	MPLETION OF	THIS FORM PLE	ASE CONTA	CT ECHELON	CLAIMS	S SERVICES	:	
Phone: (03) 9860 3413									
Please select the compensation being sought:									
☐ PROPERTY DAM	AGE PERSONAL INJURY			□мо	☐ MOTOR VEHICLE			OTHER	
CONTACT DETAILS									
Title:	□мх	□ MX □ MR □ M		] MRS	IRS		☐ MS		
Full Name:									
Address:									
Suburb:					State:		Postcode:		
Email:					·				
Telephone No:				Mobile:					
Do you wish for all correspondence to be sent to you via email?				☐ YES		□NO			
AUTHORITY FOR AN A	GENT TO	ACT							
If you wish for a third par	ty to act	on your behalf in	this request for c	ompensation	, please sign a	nd comp	lete the follow	wing:	
I, hereby authorise Echelon Claims Services to discuss my request for									
compensation against East Gippsland Shire Council with, who I have instructed to act on my behalf.									
Please complete third pa	irty conta	ct details below;							
Name:									
Address:									
Suburb:					State:		Postcode:		
Email:									
Phone Number:									
Signature:					Date:				

DATE AND TIME OF INC	CIDENT DETAILS					
Date of Incident:		Time of Incident:				
Have you notified Council of this incident before:		Date of first notification:				
WEATHER CONDITION	S					
Conditions (E.g. Dry, Wir	ndy, Raining, Sunny):					
LOCATION OF INCIDEN	ΙΤ					
Address:						
Suburb:			State:		Postcode:	
Please provide details of question. If the location is	the exact location with supports unclear please provide a sket	ting photographs (via email) r ch to assist us in our investig	marked to c ations:	learly de	epict the area	in

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 provi	de a minimum of 3 phot	ographs in support of your request f	or compensation.		
Your photographs need to The area of property to Area where a trip and The roots and/or trees Proof of injuries sustant A variety of shots and	that has sustained dama fall occurred (Mark an 'is s that you allege have ca ined.	ige.  x' on the exact tripping point)  aused property damage.			
THE ROAD MANAGEME	ENT ACT 2004				
Does your request for co of the roadway/footpath?		damage arise from the condition	☐YES	□NO	
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 \$1,681.00 of any claim (the "threshold amount") regardless of liability (includes motor vehicles, clothing, glasses etc).					
Does your request for co	mpensation exceed the	threshold amount?	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 2025/2026 financial year.					
See: https://www5.aust	lii.edu.au/au/legis/vic/d	consol act/rma2004138/s110.html	for further information	on.	
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 SOU	GHT				
You are required to attact provide a minimum of 2 x		entation to substantiate your loss. Fe or receipt etc.	or property damage	claims please	
Please Note: The reques	et of this information mus	st not be seen as an automatic acce	ptance of liability.		
Amount:	\$	Is the total GST Inclusive?	YES	□NO	
Please Note: you will be required to substantiate the amount of compensation sought. Requests for compensation are assessed on their own merit and any payments made will come from Council funds					

INSURANCE DETAILS -	- PLEASE COMPLETE WHERE APF	PLICABLE			
Do you have Insurance?			☐ YES	□NO	
Have you claimed against your insurer?			☐ YES	□NO	
If YES, please advise the outcome of your claim:			☐ ACCEPTED	☐ DENIED	
Insurance Provider:				'	
Claim / Policy Number:					
Contact Name:		Contact Number:			
Have you lodged a claim	with TAC/VWA?		☐ YES	□NO	
If YES, please advise the	e outcome of your claim:		☐ ACCEPTED	☐ DENIED	
WITNESS - PLEASE BE	ADVISED, WITNESS STATEMENTS	S FROM FAMILY AND	FRIENDS ARE N	OT ACCEPTED	
Did anyone witness the in	ncident?		☐ YES	□NO	
If YES, please provide th	eir details:			'	
Contact Name:		Contact Number:			
E-mail:					
Address:					
Suburb:			State:	Postcode:	
EVIDENCE					
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and/or damage through s rests with you as the personant series with your series assessed on and acceptar insurers. Your request for Echelon Claims Services assessed on their own make an accurate decision Request for Compensation factors beyond Council's Council complies with all	some form of negligence. In any pubsion seeking compensation. Neither of the sence you are supplying:  ed attached to this document?  are compensation will be subject to invest will endeavour to respond as quickly perits, it can take some time to collate on on liability. The process takes appon Form. However, this timeframe can	n admission of liability of estigation and the findir as possible. However all the relevant information be longer due to delate the Privacy and Data F	rden of providing paims Services can  YES  on the part of Courngs assessed on the part of cation before we are so from the time Eclays in obtaining information Act 2014	noof of negligence assist you in this.  NO  notil and/or their neir own merits.  or compensation are in a position to nelon receives your ormation and other  and is committed	
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COUNCIL USE ONLY					
Council:		Council Reference:			
Received by:			Date:		
Council's notes for Echelon 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 <a href="https://www.jltpublicsector.com/echelon-privacy-policy.html">https://www.jltpublicsector.com/echelon-privacy-policy.html</a>. 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