



Liability Claims – Guidance Notes

It is important that you read and understand these guidance notes before completing the claim form

When can a claim be made against the Council?

To successfully claim compensation from the Council you will need to prove that the Council has been at fault in law. There is no automatic entitlement to compensation, and just because an incident has happened it does not necessarily mean the Council will be held to blame.

Other Insurance Cover

If you have Home Contents, Buildings or Motor Insurance that would cover your loss/damage, we recommend that you make a claim on the appropriate policy first. This is because settlement will most likely be on a “new for old” basis and you will not need to prove that anyone is at fault for the loss, so it is likely that your claim will be dealt with more quickly. Your insurers may then seek to recover their costs from the Council if they feel the Council has been at fault. A successful recovery by your insurers will mean that your premiums and any no claim discounts are unlikely to be affected.

What information must YOU provide when you make a claim?

The following information must be provided:-

- A clear summary of the facts on which the claim is based including the time and date of the incident.
- An indication of the nature and extent of your injury(ies) and/or details of any property damage
- Details of any financial loss suffered
- Sufficient other information to enable formal investigations to start e.g. photographs. Any photographs of the incident location should clearly show the defect and surrounding area. Please mark the exact defect with an ‘X’ and show your direction of travel. If photographs are unavailable, you may wish to use online map services to provide the precise location. The nearest house number or street lamp column would also be of assistance.
- **Without this information the claim cannot be processed**

What happens once you have submitted a claim?

- The Insurance and Risk Management Section will acknowledge receipt of your claim within 15 working days and may forward your claim to the Council’s external insurance claims handlers. The claims handlers will acknowledge receipt within 5 working days.
- The Council will investigate the allegations and send a report to the claims handlers.
- Claims are always processed as quickly as possible, however, the law allows up to 3 months to investigate personal injury claims and decide whether or not there has been fault on the part of the Council. Whilst there is no such time limit for property only claims, the Council will endeavour to provide a decision on liability within 3 months.
- If the claim is for damage to your property the claims handlers will require original receipts and/or replacement estimates and confirmation of the age of the items. Please be aware that any offer of

settlement **will not** be on a new for old basis and as such will be adjusted for wear and tear.

- As well as the information outlined above the claims handlers may also ask you to provide your full name, date of birth and National Insurance number, if not already supplied.
- If your claim is for injury, medical evidence will need to be gathered. The claims handlers will forward a form for completion to allow them to approach your GP/hospital for a report. Please be aware that the amount of time it takes to receive the report can vary widely and is something over which they have no control other than to issue regular reminders. You can of course chase the GP/hospital yourself in this instance.
- If the GP/hospital report is not sufficient to accurately assess the value of your injuries the claims handlers may have to appoint a consultant who will need to examine you to prepare a comprehensive report. This process can be lengthy and may take a number of months.

The final outcome

Once all of the evidence has been collated and assessed the claims handlers will make a decision based on the legal liability of the Council: -

- If it is concluded that there is no liability and the claims handlers are not paying your claim you will receive a letter detailing why. If you wish to discuss this further you need to contact the claims handlers.
- If liability is accepted the claims handlers will make an offer of compensation, in writing, which they consider will accurately reflect an appropriate level of compensation in the circumstances.

Fraud

Any claim that is found to have been fraudulently intimated or exaggerated, whether during the processing of the claim or subsequently, may be passed to the Police and/or Crown Prosecution Service and may be subject to a criminal prosecution

Queries

Any queries please contact: -

e-mail Liability.Claims@cardiff.gov.uk

Tel: 029 2087 2319/2253

Write to: **Cardiff Council, Insurance Claims, Room 354, County Hall, Cardiff, CF10 4UW**

You are entitled to seek independent legal advice at any stage during the processing of your claim.

Please retain these guidance notes for future reference

This form is also available in Welsh

Cardiff Council - Liability Claim Form



For a claim to be successful, you must prove that the damage/injury was the fault of the Council. Please refer to the Guidance Notes attached to this form. They are provided to help you complete the claim form correctly and to help avoid any unnecessary delays.

Section A: Claimant Details	
Name:	<u>Type of incident</u>
Mr / Mrs / Miss / Other * Male / Female *	Personal Injury* If claiming for personal injury Section B must be completed
Address:	Other Damage* Complete Section A and from Section C onwards
Postcode:	Vehicle, Clothing, Property, etc.
Telephone Number:	* - Delete as appropriate
Email address:	
Are you a Council tenant YES <input type="checkbox"/> NO <input type="checkbox"/>	Preferred Method of Contact: Post <input type="checkbox"/> Email <input type="checkbox"/>

Section B: Personal Injury	
National Insurance No:	Employers Details:
Date of Birth:	
Occupation:	
Please describe injuries suffered in the accident / incident:	
Have you consulted a doctor about these injuries? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Name of Doctor:	
Address:	
Postcode:	
Name of any hospital attended after the accident / incident:	
Were you taken to hospital by ambulance? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Name of Consultant / Doctor who treated you:	
Are you still receiving treatment? YES <input type="checkbox"/> NO <input type="checkbox"/>	

Section C: Particulars of Incident

Location:

Date of incident:

Time of incident:

am / pm

Please describe exactly how the incident occurred, and what damage was caused to your property, or injury caused to you. Wherever possible please attach photographs of the damaged property and the defect that caused the incident. Any photographs of the incident location should clearly show the defect and surrounding area. Please mark the exact defect with an 'X' and show your direction of travel. If photographs are unavailable, you may wish to use online map services to provide the precise location. The nearest house number or street lamp column would also be of assistance. Please note the Council must be able to identify the exact defect to progress your claim.

Was any damage caused as a direct result of work being undertaken on your home or property by a Council employee? YES NO

If "Yes" please provide details of employee and the service they work for:

Was the damage caused as a direct result of work being carried out on your home by a Contractor, or Contractor's employee(s), working on behalf of the Council? YES NO

If "Yes" please provide details of the Contractor and/or their employee:

(Please note that claims involving a Contractor, or Contractor's employee, will be passed to the Contractor to deal with you direct under their own liability insurance cover)

Section D: Liability

In what way / why do you hold the Council to be at fault?

Are you aware of whether the Council has previously been informed of the defect that caused the damage / incident?

YES Please provide details in Section E

NO Go to Section F

Section E: Previous Report of Defect

On what date(s) was the defect reported? (dd:mm:yyyy)

To whom was the defect reported?

On what date(s) were any repairs undertaken? (dd:mm:yyyy)

If a contractor carried out the repairs, please give their details, if known:

Please give details of any remedial / repair work carried out, if known:

Section F: Property Damage Claimed

Receipts for damaged items and/or repairs estimates should be attached to this form

Description of items damaged	When bought	From where	Cost of item	Cost of repair/cleaning	Cost to replace

Section G: Witnesses

Please supply name(s) and address(es) of witness if appropriate

Section H: Household Insurance

Do you have Home Contents or Building Insurance?

YES NO

If Yes please provide the name of your insurer - _____

Are your contents insured through the Council's own Home Contents Insurance Scheme?

YES NO

If yes to either of the above, have you made a claim for this loss/damage on

your own insurance policy?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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Section I: Important Notices

Data Protection Declaration.

The information you have provided will be processed by Cardiff Council in line with the Data Protection Act 2018, for the purpose of processing your liability claim. Your information will be treated as confidential, but it may be shared with the Council's insurers and third parties including external claims handlers, solicitors and other relevant parties that may form part of the claims process.

Under our duty to protect public funds we administer, Cardiff Council and its representatives may also use and share the information provided for the prevention and detection of fraud. This can include the search of anti-fraud/theft registers that help verify information and prevent fraudulent claims and also the passing of information relating to this incident to the appropriate register(s) for the future reference of other parties. For more information on how the Council process your personal information in line with Data Protection Law, see our full Privacy Policy on the Council's website https://www.cardiff.gov.uk/ENG/Home/New_Disclaimer/Pages/default.aspx

Section J: Declaration

I confirm that I am the subject of the information above and declare that the information given in this forms to be true and complete. I have read and understood the details of how my personal data will be processed and the guidance documents that have been provided for my attention.

In signing the below I understand the information I have provided will be processed by Cardiff Council as outlined above.

Print Name: _____

Signature: _____ Date: _____

Please keep a copy of this completed form and return the original together with all supporting information to:

Liability.Claims@Cardiff.gov.uk

Or by post to:

Cardiff Council, Insurance Claims, Room 354, Cardiff, CF10 4UW