Please be advised that any information provided on, and with, this Notice of Claim will be published in the Public Access area of the Erie County Water Authorities website which can be accessed by the General Public.

C-2

NOTICE OF CLAIM FORM

ERIE COUNTY WATER AUTHORITY 295 Main Street – Room 350 Buffalo, New York 14203-2494 (716) 849-8465

| Claimant(s) Name | Para! | Hill | | | | | |
|----------------------------------|-------------------------|------------------------------------|----------------------|----------|-------|-----------------------|--|
| Address | ess 122 Laurentan Dr. | | | Cell Pho | ne# | 716 | |
| Email Address | Address | | | Home Ph | one # | | |
| Accident / Damag | ge / Injury | 122 Laure | ntan)r. | Cheel | Howas | a, Ny 14225 | |
| Date of Incident | 1/19 | 25 | Time of Incide | ent | | a.m./ p.m. | |
| Police Contacted? | | Yes (No | Police Report Taken? | | | Yes /No | |
| Name of Police Agency | | | | | | | |
| PROPERTY DAN If this is not your | | S ONLY he name and address of t | he owner: | | | N/A if not applicable | |
| Name Sa | vaHill | (| | | | | |
| Address 122 Laurentian Br | | | | Zip Code | 1422 | 5 | |
| Home Phone # | ne Phone # 116-628-6438 | | | one # | | | |
| | | PLEASE ATT | ACH ESTIMA | TES | | | |
| Repair Estimates \$ 7788.43 | | | | \$ | \$ | | |
| ROPERTY DAMA | GE AND PER | SONAL INJURY W | ITNESSES | | | | |
| Name Sovo | ame Sava Hill | | | | | | |
| odress 122 Lawrentian Dr 14225 | | | Address | | | | |
| Phone 116 | | | Phone | | | | |

Attach copies of Medical bills once submitted to health insurance or automobile insurance.

ONLY PROVIDE COPIES OF THE MEDICAL BILLS. DO NOT PROVIDE MEDICAL RECORDS WITH THIS CLAIM FORM.

Claimant's Statement (please print legibly and be specific):

| January 19th 2025 there was a water main break in front of |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| our house. The water authority came and repaired a pipe |
| in front of our house. There was a noticeable indent in the |
| side walk. Then our basement to let as ink were backed up. |
| We called the Town of Cheektowaga and They came with a camera |
| to chadle the server mes which showed clear but the lateral |
| prope in front of our house looked to be damaged (Thave emailed there |
| profuses over) they advised to call a plumber and see what they |
| would say. Roy's plumbing came 1/28 and snaked the line |
| |
| and found clay stairt on the snake. Roy's puta camera down the line of found damage to the lateral prize. (I have emailed |
| |
| the estimate + photos) Please reach out to me with any additional |
| you for taking the time to read this. |
| you for taking the time to read this. |
| |
| |
| |
| |
| |
| |
| |
| All statements herein are made under penalty of perjury. Add Additional Pages if necessary |
| All statements herein are made under penalty of perjury. Add Additional Pages it necessary |
| - Value of blood |
| Date: January 31st 2025 Claimant's Signature |
| |
| STATE OF NEW YORK) ss: |
| COUNTY OF ERIE) |
| On this 3 L day of Tanvang, 2027 before me, the undersigned, personally appeared, Sam L HIII |
| personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is |
| subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed |
| the instrument. |
| AMY THERESA MILLER AMUST MULL |
| Lic. #01MI6219592 Notary Public |

Qualified In Erle County COMM. EXP. 3 29 207.4