Sir y Fflint
Flintshire

Making an Application for Compensation against Flintshire County Council

Liability Applications – Guidance Notes

It is important that you read 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 can 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 are unlikely to be affected.

What information must YOU provide when you make an Application for Compensation?

In completing the Application please provide as much detail as possible concerning the incident. This will ensure your application can be processed as quickly and efficiently as possible. Please answer every question that is applicable.

The following information MUST be provided:-

- A clear summary of the facts on which the application is based including the time and date of the incident;
- **A precise indication of the location of the incident e.g. rather than High Street state o/s Number 62 High Street or include the proximity to landmarks etc.**
- An indication of the nature and extent of your injury(ies) and/or details of any property damage;
- Details of any financial loss suffered; and
- Sufficient other information to enable formal investigations to start.

WITHOUT THIS INFORMATION THE APPLICATION CANNOT BE PROCESSED

What happens once you have submitted an application?

- The Insurance Section will acknowledge receipt of your claim within 5 working days.
- Your application will then be forwarded to the relevant Claims Handlers on the same day. The Council will then investigate the allegations and forward a report to the Claims Handler.
- The Claims Handler will acknowledge their interest in the matter. They will look to confirm their position within 40 working days should your application involve a personal injury in accordance with the pre-action protocol for low value claims between £1,000 and £25,000. If your application involves no personal injury then they will look to deal with it within 90 working days.

- 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.
- 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.

Please be advised that once the Claims Handlers have acknowledged their interest in your application all future enquiries/correspondence should be directed to them and not the Insurance Section at Flintshire County Council.

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 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.

If you are unhappy with either of these outcomes you should discuss this further with the claims handlers.

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.

Data

You are advised that this Council is under a duty to protect the public funds it administers and to this end may use the information you have provided for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. Please also refer to the Privacy Notice at Section I of this document.

Application Form

To obtain an Application Form: -

e-mail

Insurance@flintshire.gov.uk

Or write to: **Insurance Section, Flintshire County Council, Ty Dewi Sant, Ewloe, Flintshire CH5 3FF**

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

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Liability Application Form

For an application 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:	Mr / Mrs / Miss / Other * Male / Female *
Address: Postcode:	
Home Tel Number:	Mobile Number:
Email Address:	
Date of Birth:	National Insurance No:
Occupation:	Employers Details:
Are you a Council tenant YES ☐ NO☐	
TYPE OF INCIDENT: **Personal Injury -** If claiming for personal injury only	Complete all Sections
Damage - Vehicle, Clothing, Property, etc. If Vehicle please provide VRN:	Complete from Section C onwards
Both	Complete all Sections
Other - For example loss of income/injury to pets etc.	Complete from Section C onwards

Section B: Personal Injury		
Please describe the injuries suffered in the accident / incident:		
Have you consulted a doctor about these injuries?	YES ☐	NO☐
Name of Doctor: Address: Postcode:		
Name of any hospital attended after the accident / incident: Were you taken to hospital by ambulance? Name of Consultant / Doctor who treated you:	YES ☐	NO☐
Are you still receiving treatment?	YES ☐	NO☐

Section C: Particulars of Incident		
Location: *(If you are unable to supply photographs, please draw a sketch of the location to aid with identification)*		
Date of incident:	Time of incident:	am / pm
Make and model of Vehicle:	VRN:	
Please describe exactly how the incident occurred and what damage was caused either to your property or through injury to pets/livestock. Wherever possible please attach photographs of the damaged property or the defect that caused the incident.		
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 any 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)

If you are claiming for Loss of Income, please provide the following details of the works concerned.

Location:		
Duration of Works	From:	To:

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: Damages Claimed					
Description of items damaged	When bought	From where	Cost of item	Cost of repair/cleaning	Cost to replace
Receipts for damaged items and/or repairs estimates should be attached to this form					

Section G: Loss of Income		
Daily/Weekly Rate	Number of Days/Weeks	Total amount claimed
Evidence of loss of income should be attached to this form		

Section H: Witnesses	
Please supply the name(s) and address(es) of witness if appropriate	
Name:	Mr / Mrs / Miss / Other *
Address: Postcode:	
Name:	Mr / Mrs / Miss / Other *
Address:	

Postcode:	

Section I: Household Insurance

Do you have Home Contents or Building Insurance that would cover this loss/damage?	YES ☐	NO☐
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 ☐	NO☐

Section J: Privacy Notice

Your data will be processed by Flintshire County Council only for the specific purpose of administering your application for compensation against the Council. Processing of your personal data is necessary for reasons of substantial public interest in processing your application for compensation.

Flintshire County Council will share your data with third parties such as our and other insurance companies, legal representatives of all parties and if necessary, the Courts Service should the matter proceed to litigation.

Flintshire County Council will retain your information for a period of 6 years after the final settlement date. Up to date information on the Council's current retention periods are available on the Council website.

For further information about how Flintshire County Council processes personal data and your rights please see our privacy notice on our website –

http://www.flintshire.gov.uk/en/Resident/Contact-Us/Privacy-Notice.aspx

If you feel that Flintshire County Council has mishandled your personal data at any time you can make a complaint to the Information Commissioners Office by visiting their website or by calling their helpline on 0303 123 1113.

Section K: Declaration

I certify that, to the best of my knowledge and belief, the information given in this form is true and correct.

I confirm that I have read and understood the Privacy Notice contained in Section I and the guidance notes attached to this application form.

Signature: _____ Print Name: _____

Date: _____

Section L: Submission

Once you have completed all the relevant information, either return this form via e-mail to:-

Insurance@flintshire.gov.uk

Or post it to: **Insurance Section, Flintshire County Council, Ty Dewi Sant, Ewloe, Flintshire CH5 3FF**