

	Mailbox Damage Policy	Revision #	
		Implementation Date	2/20/2025
		Last Reviewed/Update Date	1/31/2025
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1. Purpose

The City of Marion is committed to maintaining the safety and accessibility of our streets. Occasionally, due to weather conditions or unforeseen events, residential mailboxes may get damaged. This policy establishes a consistent and fair procedure for responding to and resolving claims of mailbox damage caused by City operations.

2. Scope

This policy would apply to all City departments, that may inadvertently cause mailbox damage by City operated equipment.

3. Responsibilities

The applicable City departments must investigate the claim and repair or replace the mailbox(es) when found appropriate.

4. Procedure

Residents shall submit a claim form within 30 days of the incident by filling out the "Mailbox Damage Claim Form" that is located online at www.cityofmarion.org.

Name, address, incident date, incident details and damage descriptions (including photos) must be provided. Residents can choose to have the City replace the mailbox with a standard black mailbox or receive reimbursement in an amount up to \$75.00 to replace the mailbox themselves.

5. Questions

For questions, contact Public Works at 319-377-6367 or email Public-Works@cityofmarion.org.



Mailbox Damage Claim Form

Instructions:

1. Complete all sections of the claim form.
2. Attach required photographs and documentation.
3. Submit the form and supporting documentation to Public Works at 202 44th Street, Marion or email public-works@cityofmarion.org.

Questions:

Please contact Public Works at 319-377-6367 or email public-works@cityofmarion.org.

Claimant Information:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Incident Details:**Damage Description:****Choose One Option:**

_____ Replacement: I request the City replace my damaged mailbox with a standard black mailbox.

_____ Reimbursement: I will repair or replace my mailbox and request reimbursement of up to \$75.00. (Receipts for the repair or replacement must be provided.)

Supporting Documentation: Please attach the following:

- Photographs of the damaged mailbox.
- Receipts or estimates for repair/replacement (if applicable)

Declaration: I declare that the information provided in this claim form is true and accurate to the best of my knowledge. I understand that submitting false information may result in the denial of my claim.

Claimant Signature: _____ Date: _____