



MAILBOX REPLACEMENT POLICY

City of Chardon
Department of Public Works
111 Water Street
Chardon OH 44024
(440) 286 - 2655

Purpose:

The intent of this policy is to standardize the long-standing process to replace and/or repair mailbox damage caused by City crews during snow and ice control or any other maintenance activity.

Applicability:

This policy applies to all locations within Chardon City limits.

Policy:

The City's primary obligation is to ensure safety by keeping roadways free of snow and ice. Damage to mailboxes is often unavoidable due to their close proximity to the roadway. Because mailboxes are generally located inside the public right of way, and the service of plowing streets is for the public good, this policy assumes there is a shared responsibility between the City and citizen when mailboxes are damaged during City operations.

All mailboxes should be installed (and maintained) in a fashion as to absorb the impact of snow coming off the face of a plow blade. Citing these criteria, the City's policy shall be to grant "no" reimbursement for a mailbox failure due to impact of snow or projectiles coming from the road.

When the City receives a complaint that a mailbox has been damaged, an investigation of the circumstances will be conducted. If a mailbox was incorrectly installed or not physically hit by City equipment, the City will not repair or replace the mailbox.

Should it be determined that said damage was a result of a mailbox being struck by City equipment, then the following reimbursement rate for damaged mailboxes would be authorized:

- Mailbox only: \$35.00
- Post only: \$45.00
- Complete Post and Mailbox: \$80

For additional questions, please contact Leroy Dowling, Superintendent of Streets, Parks and Cemeteries at: 440-286-2656.



MAILBOX REPLACEMENT CLAIM FORM

INSTRUCTIONS: Your claim cannot be processed without completion of the sections below. Please print all information legibly. If additional space is needed, you may attach additional sheets. The more detailed and complete your responses to the following questions, the more efficiently the City of Chardon will be able to process and evaluate your claim. This claim will be processed in accordance with The City of Chardon Mailbox Replacement Policy.

Today's Date: _____ Name: _____

Address: _____

Phone: _____ Email: _____

PROVIDE THE FOLLOWING INFORMATION FOR THE MAILBOX INCIDENT:

Check one: Mailbox Post Mailbox and Post

Date/time of Incident: _____

Description: _____

Witnesses: Please identify all witnesses to the incident, if there are any, by name, address and telephone number (if known). _____

Additional Comments: _____

Making a false statement involving any of the sections above may subject the individual to criminal prosecution for violation of City Ordinance 525.02 (Falsification). The maximum penalties for Falsification are up to six (6) months in jail and/or a \$1,000.00 fine. I hereby certify that the statements and assertions I have made above are true and accurate.

(Signature of Claimant)

WHEN COMPLETED, PLEASE RETURN TO THE CITY OF CHARDON, ATTN: PUBLIC SERVICE DEPARTMENT, 111 WATER STREET, CHARDON, OHIO 44024