

INDIVIDUAL REVIEW OPTION CLAIM FORM FOR GOVERNMENTAL ENTITIES

You should complete this form if:

- Your Governmental Entity operated in a location that was provided tap water service from West Virginia American's Kanawha Valley Water Treatment Plant on **January 9, 2014, AND**
- You are requesting an individual review for your Business (governmental) Claim as explained in the claim form instructions.

If you do not want to itemize your claimed losses you may submit the Simple Claim Form instead of this form. The Simple Claim Form is available at www.wvwaterclaims.com.

The deadline to submit this claim is February 21, 2018.

READ THE INSTRUCTIONS BEFORE COMPLETING THIS FORM. THE INSTRUCTIONS CONTAIN IMPORTANT DEFINITIONS AND INFORMATION ABOUT HOW TO DOCUMENT YOUR CLAIMED LOSS.

Part 1. INFORMATION ON GOVERNMENTAL ENTITY	
Name of Governmental Entity:	
Street address of Governmental Entity location that was served by KVTP on JANUARY 9, 2014:	
If the Governmental Entity is claiming losses for more than one location, you must submit a separate claim form for each location.	
Name of Authorized Person Completing this Form:	
First Name	
Middle Name or Initial	
Last Name	
Title of Authorized Person Completing this Form	
Current mailing address of Authorized Person Completing this Form (including city, state and zip code):	
Address Line 1	
Address Line 2	
City	
State	
Zip Code	
Current Telephone Number (including area code) of Authorized Person Completing this Form	
Current Email address of Authorized Person Completing this Form	

If you received a notice of this Settlement in the mail, please provide the claim identification number that appears on that notice here. The identification number is located on the top left portion of the Simple Claim Forms that were included in the notice.	
If this Governmental Entity was listed on the West Virginia American Water account for the address listed above in 2014, list that account number here.	
Attorney Information – If you are being represented by an attorney for this claim, please provide the following information.	
Attorney Name	
Attorney Law Firm	
Attorney Address	
Attorney Telephone Number (including area code)	
Attorney Email Address	

Check here if you would like you and your attorney to both receive communications from the Settlement Administrator; OR

Check here if you would like only your attorney to receive communications from the Settlement Administrator.

Part 2. Your Claim

In this section, you must identify and describe the losses you claim resulted from the Property Damage caused by the Freedom Chemical Spill and loss of use of tap water. You must identify each claimed loss by type and amount, and include the requested information along with documentation to support your claim. There are four possible types of loss that you may claim:

- 1) Repair/Replacement: The cost to clean, repair or replace components of or certain appliances and/or equipment connected to the water system that were damaged by the Freedom Chemical Spill;
- 2) Extra Expenses: Extra expenses the Governmental Entity incurred because it was required to operate without tap water as a result of the Freedom Chemical Spill;
- 3) Lost Inventory: Inventory that the Governmental Entity was required to discard because of the Freedom Chemical Spill; and
- 4) Lost Revenues: Lost revenues means certain types of lost tax revenue or other fees that the Government is entitled to collect that were not collected because of the Freedom Chemical Spill.

Section 1: CLAIM FOR REPAIR/REPLACEMENT COSTS

a. Check here [] and complete this section if you are making a claim for repair or replacement of any of the Governmental Entity's appliances and/or equipment connected to the water system. To receive compensation, you must show that it was necessary to repair or replace the appliance/equipment because the appliance/equipment was damaged by the Freedom Chemical Spill.

Appliance/Equipment Type	
Appliance/Equipment Model	
Explanation of Damage Caused by Freedom Chemical Spill	
Explanation of use by Business	
Repaired or Replaced?	Repaired Replaced (choose one)
Date of Repair/Replacement	_____ (mm/dd/yyyy)
Amount Paid for Repair / Replacement	\$ _____
Amount of Claim for Repair / Replacement <i>(See instructions for information on the amounts you can claim)</i>	\$ _____

<p>For each item claimed, please explain why the repair or replacement was necessary and how the Freedom Chemical Spill caused damage to the item that resulted in the need to repair or replace.</p>	
<p>DOCUMENTATION: You must submit documentation that shows: (1) that the appliance/equipment had to be repaired or replaced because of damage caused by the Freedom Chemical Spill, (2) the cost of the repair or replacement, and (3) the date the appliance/equipment was repaired/replaced.</p>	
<p>b. Check here [] and complete this section if you are making a claim for the amounts the Governmental Entity paid for replacement of filters used in the Governmental Entity water system or in equipment or appliances connected to the water system and/or for hiring vendors for flushing/cleaning the water system.</p>	
<p>The Governmental Entity replaced filters on:</p>	<p>_____ (mm/dd/yyyy)</p>
<p>Identify types of filters replaced:</p>	
<p>The Governmental Entity had its water systems cleaned on:</p>	<p>_____ (mm/dd/yyyy)</p>
<p>Total Cost claimed for repairing / replacing filter and/or hiring vendor to clean the water system or its components:</p>	<p>\$ _____</p>
<p>DOCUMENTATION: If you request compensation for replacing filters connected with the Governmental Entity's water system you must submit documents that show: (1) that the Governmental Entity had filters replaced, (2) the cost of replacing the filters, and (3) the date that the filters were replaced.</p> <p>If you request compensation for the cost you paid to have the Governmental Entity's water system flushed and cleaned, you must submit documentation that shows that: (1) you hired an outside vendor to clean and flush the system because of the Property Damage caused by the Freedom Chemical Spill, (2) the cost for the flushing/cleaning, and (3) the date of the flushing/cleaning.</p> <p>The Instructions provide additional information about the types of documents you should submit and the types of filters that may qualify.</p>	

You may attach additional pages if necessary.

The Instructions provide additional information about the time period during which claims for repair/replacement costs are eligible for recovery.

Section 2: CLAIM FOR EXTRA EXPENSES

Check here [] and complete this section if you are making a claim for extra expenses that the Governmental Entity incurred because its water system was damaged by the Freedom Chemical Spill and the Governmental Entity was not able to use tap water as a result. Extra expenses consist of: (1) costs that the Governmental Claimant expended to provide bottled water or other supplies to its employees because of the inability to use tap water and (2) costs incurred for allocating resources to enable a direct response to the Freedom Chemical Spill that were beyond budgeted expenditures for incident response and have not otherwise been reimbursed from any source.

The Instructions provide examples of extra expenses.

Items	Date Extra Expense Paid	Amount Paid
Substitute Water	_____ (mm/dd/yyyy)	\$ _____
Alternative Cleaning Supplies that do not Require Water	_____ (mm/dd/yyyy)	\$ _____
Extra Sewer Fees incurred as a result of flushing	_____ (mm/dd/yyyy)	\$ _____
Water Testing	_____ (mm/dd/yyyy)	\$ _____
Other Items (specify)	_____ (mm/dd/yyyy)	\$ _____
	Total	\$ _____

DOCUMENTATION: You must submit documentation that shows: (1) amounts paid for bottled water or other supplies and the actual out of pocket unreimbursed expenses you had for any response activities, (2) that the claimed extra expenses exceeded your normal operating budget, and (3) the date the extra expenses were incurred and paid.

The Instructions provide additional information about the types of documents you should submit and the time period during which claims for extra expenses are eligible.

Section 3: CLAIM FOR LOST INVENTORY	
<p>Check here [] and complete this section if you are making a claim for reimbursement for the documented value of inventory the Governmental Entity was required to destroy or discard as a result of the Freedom Chemical Spill. Lost inventory is inventory that was in existence during the Do Not Use Period and had to be destroyed or discarded as it was not usable because of the cessation of operations due to the Freedom Chemical Spill. Perishable lost inventory in existence during the Do Not Use Period that was discarded within one week of the resumption of operations will be presumed to have been discarded as a result of the Freedom Chemical Spill.</p>	
Describe the lost inventory	
Was the lost inventory perishable?	Yes No (choose one)
Explain why the lost inventory had to be destroyed or discarded because of the Freedom Chemical Spill.	
The destroyed/discarded inventory was acquired/created on (if multiple dates, provide first and last dates)	_____(mm/dd/yyyy) _____(mm/dd/yyyy)
The inventory was destroyed/discarded on (if multiple dates, provide first and last dates)	_____(mm/dd/yyyy) _____(mm/dd/yyyy)
TOTAL COST of lost inventory claimed	\$ _____

DOCUMENTATION: You must submit documentation that shows: (1) the actual cost of the lost inventory, (2) the date the lost inventory was acquired or created, and (3) if available, the date the lost inventory was destroyed or discarded. You must also explain why it was necessary to destroy/discard the lost inventory. If the lost inventory was discarded more than one week after the Governmental Entity resumed operations, you must demonstrate a specific reasonable basis for the delay in the destruction.

The Instructions provide additional information about the types of documents you should submit and the time period during which claims for lost inventory are eligible.

Section 4: CLAIM FOR LOST REVENUES

Check here [] and complete this section if you claim that you lost revenue as a result of the Freedom Chemical Spill. Governmental Claimants may claim "lost revenue" using the following calculation: loss of revenues (including lost tax revenues, fees, commissions, and other sources of funds) less any saved or variable costs of operations.

Period for which lost revenues are claimed	_____ (mm/dd/yyyy) _____ (mm/dd/yyyy)
State the total amount of your claim for Lost Revenue. Your claim for lost revenue must be net of saved or variable costs of operations for the claimed period of loss	\$ _____
Identify below each component of your claim for lost revenue:	
Lost tax revenue	\$ _____
Lost fees	\$ _____
Lost commissions	\$ _____
Other (describe)	\$ _____
Describe the methodology used to calculate the lost revenue claim	
TOTAL lost revenues claim	\$ _____

Documentation: To be eligible for lost revenue, you must demonstrate (with reliable documentary evidence) that there was a documented reduction in revenue, by revenue type, that can be proven to a reasonable degree of economic certainty and directly attributed with reasonable certainty to the Freedom Chemical Spill. The Instructions provide details about the methodology to be applied to determine whether the Governmental Claimant is eligible for lost revenue.

Part 3. TOTAL AMOUNT OF CLAIM

Please provide the total amount of all losses you are *claiming* (total of losses for any repair/replacement losses, extra expenses, lost inventory and lost revenue).

\$ _____

THIS TOTAL CLAIMED AMOUNT IS THE MAXIMUM AMOUNT YOU CAN RECOVER FROM THE SETTLEMENT FOR THE GOVERNMENTAL ENTITY LOCATION IDENTIFIED IN PART 1. IF YOU DO NOT STATE THE AMOUNT OF YOUR CLAIM, THE SETTLEMENT ADMINISTRATOR WILL NOT CONSIDER YOUR CLAIM UNTIL YOU DO.

Part 4. VERIFICATION AND SIGNATURE

By signing this Claim Form, I hereby certify under penalty of perjury that:

- (a) all of the information contained in this Claim Form is true and correct;
- (b) the supporting documents attached to or submitted in connection with this Claim Form and the information contained in those documents are true, accurate, and complete to the best of my knowledge and that unless otherwise noted, the documents supporting any claim for Lost Revenues are governmental records kept in the ordinary course of the Governmental Entity's business;
- (c) I am authorized to make this Claim on behalf of the Governmental Claimant listed above; and
- (d) I understand that there can be only one Claim Form per Governmental Entity location and to the best of my knowledge I am the only person authorized to submit a claim for this Governmental Entity location and I am not aware of any other Governmental Entity or Business Claim Form for this Governmental Entity location.

Date:

Name and Title/Signature:

This Claim Form must be submitted online or postmarked no later than **February 21, 2018**.

Mail the Claim Form to: WV Water Settlement Administrator
P.O. Box 4227
Charleston, WV 25364

ONLY COMPLETE CLAIM FORMS WILL BE PROCESSED.

QUESTIONS? CALL 1-855-829-8121 OR VISIT WWW.WWATERCLAIMS.COM

INDIVIDUAL REVIEW OPTION CLAIM FORM FOR GOVERNMENTAL ENTITIES

Instructions

Please read the entire Claim Form and these Instructions before you complete the Form.

Type or print legibly all information in blue or black ink if you are using a hard copy version of the Claim Form. You may find it easier to use the online form.

Answer all applicable questions and provide all information and documents. If you do not submit supporting documents your claim will be found deficient and may be denied. Make a copy of your completed Claim Form and supporting documents for your records. **Do not submit your only copy of the supporting documents.** Materials submitted will not be returned. All copies of documentation submitted in support of this Claim should be clear, legible and complete.

Part 1

Provide the name and type of the Governmental Entity. You must provide the physical location of the Business on January 9, 2014 and other information requested.

Part 2

Section 1. Repair/Replacement Costs:

Items eligible for a repair or replacement claim are:

- 1) Replacement of filters in the water system or appliances connected to the water system;
- 2) 75% of the paid costs to replace affected appliances or equipment that was damaged by the Freedom Chemical Spill and that was used by the Governmental Entity;
- 3) The reasonable documented cost of replacing or repairing components of the water system; and
- 4) The cost of hiring an outside vendor to clean and flush the water system as directed by the flushing guidelines provided by West Virginia American and/or to meet any health department or other regulatory requirements.

Eligible Time Period. Repairs or replacements must have occurred between January 9, 2014 and February 18, 2014. If you make a claim for repairs/replacements that occurred after February 18, 2014, you must demonstrate why it was reasonable to delay the repair/replacement.

Documentation. To be eligible for repair/replacement cost, you must submit reliable documents that show:

- 1) The specific item that was repaired or replaced (such as the component of the water system or appliance that was repaired/replaced);
- 2) If you are making a claim for replacement of an appliance or equipment you must provide reliable documentation that it was necessary to replace the appliance or equipment because of the Freedom Chemical Spill. For example: a contemporaneous communication from the manufacturer of the appliance or equipment or from a repair technician that advises that the item was damaged by the Freedom Chemical Spill and could not be repaired effectively or that it would cost more to repair the item than to replace it.
- 3) The cost of the repair or replacement; and
- 4) The date of the repair or replacement.

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Examples of the types of documents that you may submit include:

- a) Invoices for the repair service or item showing the item, the cost and the date of service or replacement;
- b) Sales receipts for the service/items showing the cost and the date of the sale;
- c) Credit card statements that list the items repaired/replaced, the cost and the date of the sale;
- d) Contracts with the vendor that performed the service showing the particular service, the date of the service and the cost of the service; and/or
- e) Canceled checks or bank statements that demonstrate payment to a vendor for the repair/replacement.

Note: The documents submitted must demonstrate all necessary information. A credit card statement, for example, might provide the amount paid for an item or service but might not specify the item or service. A canceled check might be sufficient to show the cost but not the date of service. You may submit several documents that together provide all the necessary information.

Section 2. Extra Expenses:

To claim extra expenses, the Governmental Entity must demonstrate Property Damage. The Governmental Entity may recover costs paid for the Property Damage and for extra expenses.

Eligible Time Period. Extra expenses means amounts that the Governmental Entity was reasonably required to incur during the Do Not Use Period in order to operate during the Do Not Use Period. A Governmental Entity may claim the cost of replacement water through March 3, 2014. A Governmental Entity may also claim other extra expenses beyond the Do Not Use Period through March 3, 2014 if the Governmental Entity can demonstrate a specific reasonable basis for incurring extra expenses after the end of the Do Not Use Period. No payment can be made for any claimed extra expenses incurred after March 3, 2014.

Examples of extra expenses are:

- 1) Substitute water;
- 2) Alternative cleaning supplies that do not require water;
- 3) Extra sewer fees incurred as a result of flushing the water system as directed by the flushing guidelines provided by West Virginia American;
- 4) Costs of water testing; and
- 5) Unreimbursed response costs paid in excess of budgeted expenditures that were incurred in direct response to the Freedom Chemical Spill.

Documentation. To be eligible for extra expenses, you must submit documents that show:

- 1) The amount paid for each type of extra expense (in the case of extra sewer fees, you must submit documents demonstrating the difference in the normal sewer fees and those incurred in connection with the flushing);
- 2) The specific extra expense – such as substitute water or alternative cleaning supplies;
- 3) The dates the extra expenses were incurred; and

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- 4) The Property Damage (as defined below) you incurred.

Examples of the types of documents that you should submit include:

- a) Invoices or sales receipts showing the item purchased and the date of purchase;
- b) Contracts with the vendor showing the items acquired and the date of acquisition;
- c) Credit card statements with sufficient detail to determine the expense incurred and the date the expense was incurred; and/or
- d) Canceled checks or bank statements showing the item purchased, the amount paid and the date the expense was incurred.

Section 3. Lost Inventory

To be eligible for reimbursement for lost inventory:

- 1) The lost inventory must have been rendered unusable as a result of the cessation of operations due to the Freedom Chemical Spill. If the lost inventory was perishable, there is a presumption that its loss was caused by the Freedom Chemical Spill;
- 2) The lost inventory must have been in existence during the Do Not Use Period (this date depends on your location, for the end of the Do Not Use Period, see below);
- 3) The lost inventory must have been discarded or destroyed within one week of the resumption of operations. If you make a claim for inventory discarded or destroyed after this date, you must explain why it was reasonable to discard or destroy the inventory after the end of the Do Not Use Period; and
- 4) You must have written documentation of the cost of the lost inventory.

Time Period of Eligible Loss. The lost inventory must have been in existence during the Do Not Use Period and must have been discarded or destroyed within one week of the Governmental Entity resuming operations unless you can demonstrate a specific reasonable basis for the delayed loss or destruction.

Documentation. You must attach documents that:

- 1) Identify the lost inventory;
- 2) Show the dates the lost inventory was acquired or created;
- 3) Show the costs incurred in creating or obtaining the Lost Inventory; and
- 4) If available, show the dates the Lost Inventory was discarded or destroyed.

Examples of the types of documents that you should submit include:

- a) Itemized inventory list from January 2014, including the quantity, value per unit, type of valuation (cost, sales, other), date acquired, and reason for destruction/disposal;
- b) Invoices or receipts from the vendors from which you obtained the inventory showing the costs of obtaining or creating the inventory;
- c) Credit card statements, bank statements, or cancelled checks showing the purchase of the lost inventory and the amount and date of the purchase;

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- d) Inventory lists or purchase records documenting the inventory that was destroyed or disposed of; or
- e) Receipts showing the disposal of the lost inventory.

Section 4. Lost Revenues

Governmental Claimants may use the following formula to compute a claim for lost revenue: Loss of revenues (including lost tax revenues, fees, commissions, and other sources of funds) less any saved or variable costs of operations.

Time Period of Eligible Lost Revenue Claim. You may claim lost revenue for the period January 9, 2014 through February 24, 2014. If you assert lost revenue after February 24, 2014, you must demonstrate to a reasonable degree of economic certainty (using forensic accounting methods) that there is a direct causal link between the Freedom Chemical Spill and the alleged loss of revenues, accounting for all factors affecting revenues.

Documentation. The Governmental Entity Claimant must submit:

- 1) Actual tax revenues for the years 2012 through the period of claimed lost revenue;
- 2) Actual fees and commissions or any other sources of funds that the Governmental Entity typically receives (except for Federal funds or if the Governmental Entity is a City, municipality or county except for State funds) and that the Governmental Entity claims is a component of lost revenue;
- 3) All saved or variable costs of the operations of the Governmental Entity; and
- 4) The Governmental Entity's computation of Lost Revenues showing the methodology employed and the details of the computation. The Governmental Entity must submit all data and documents relied on in making this computation including: (1) the underlying tax and other revenue records relied upon, (2) an analysis that shows the basis for asserting a causal link between the Freedom Chemical Spill and the claimed lost revenue and that accounts for all factors affecting revenue and (3) an explanation of the forensic accounting methodology employed in the computation. You must identify the person /firm that prepared the computation and provide the credentials of that person/firm.

PART 3

You **MUST** specify the total amount of your claim for the Governmental Entity location identified in Part 1. Without a total, your claim will **NOT** be processed. Your claim payment will **NOT** exceed the amount you claim.

PART 4

You **MUST** sign the verification. Without a signed verification, your claim will **NOT** be processed. By signing the verification, you acknowledge that under the terms of the Amended Settlement Agreement you are releasing all claims the Governmental Claimant has or may in the future have against the Defendants for the Governmental Entity location identified in Part 1.

DEFINITIONS

"Business" means a Commercial Business, non-profit entity or Governmental Entity.

"Commercial Business" means a Business that is not a non-profit entity or a Governmental Entity.

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“Defendants” means West Virginia-American Water Company (“West Virginia American”), American Water Works Company, Inc., American Water Works Service Company, Inc., and Eastman Chemical Company.

“Do Not Use Period” means the period of time during which the Governmental Entity was subject to the Do Not Use notice issued by West Virginia American in consultation with the West Virginia Bureau for Public Health that tap water supplied from the KVTP should not be used other than for toilet flushing or fire protection. The Do Not Use Period differs based on the location of the Governmental Entity but does not extend beyond January 18, 2014.

“Eligible Business Location” means a Business that was located at real property that was supplied tap water by the KVTP on January 9, 2014.

“KVTP” means the Kanawha Valley Water Treatment Plant.

“Freedom Chemical Spill” means the January 9, 2014 chemical spill into the Elk River in Charleston, West Virginia from the site owned by Freedom Industries, Inc. including the introduction of water containing the spilled chemicals into the Kanawha Valley Water Treatment Plant and the Kanawha Valley Distribution System operated by West Virginia American.

“Governmental Entity” means an instrumentality of state, county, or municipal government created by or pursuant to statute, regulation, or ordinance.

“Partially Shut Down” or “Partial Shut Down” means a Business that was Shut Down only with respect to certain activities conducted by the Business while other business activities continued (e.g., food service operations within a larger retail store). A separate Business that operates at the same location as another Business and meets the definition of Shut Down is considered to be Shut Down and not Partially Shut Down even if other separate Businesses operating in the same location were not Shut Down.

“Property Damage” means physical damage to or destruction of tangible property, at a residential or business location resulting from the Freedom Chemical Spill, including the loss of use thereof at any time resulting therefrom; and loss of use of tangible property which has not been physically damaged or destroyed arising from physical damage to or destruction of other tangible property. Property Damage includes the presence of chemical or chemical residue in the water system (pipes and other components) from the Freedom Chemical Spill that required cleaning and flushing the water system to remove such residue from pipes and appliances and/or to clean or replace certain components of the water system as recommended in the flushing guidelines provided by West Virginia American Water.

“Shut Down” means that the Business was (i) conducted at a location where the Business making the Business Claim possessed a West Virginia Business Registration Certificate for the location that is the subject of the Business Claim and (ii) with respect to that location, was subject to a regulation requiring it to cease operations, or a direct order or instruction from a regulatory agency to cease the operations regulated by that regulatory agency, during the Do Not Use Period as a result of the Freedom Chemical Spill. A separate Business that operates at the same location as another Business and meets the definition of Shut Down is considered to have been Shut Down even if other separate Businesses operating in the same location were not Shut Down; however, an individual who leases space from a Business that was Shut Down but who does not have any ownership interest in the Business that was Shut Down does not meet the definition of Shut Down. A voluntary decision to cease or reduce operations does not meet the definition of Shut Down.