

ADMINISTRATIVE PROCEDURE
SAN DIEGO UNIFIED SCHOOL DISTRICT

NO: 2660

PAGE: 1 OF 3

CATEGORY: **Fiscal Management, Payroll**

EFFECTIVE: **5-01-68**

SUBJECT: **Reimbursement to Employee for
Property Loss or Damage**

REVISED: **12-16-03**

A. PURPOSE AND SCOPE

1. To outline administrative procedures providing for district reimbursement of the cost of repairing or replacing employees' property damaged in the line of duty *as a result of malicious acts, without fault of the employee*. Theft of personal property and of contents of vehicles is not included; however, property lost in the line of duty due to robbery is included.
2. **Related Procedures:**
Employee illness or injury on the job 5170
Employee liability 7180

B. LEGAL AND POLICY BASIS

1. **Reference:** Board policy: I-1900, I-2815; Education Code Section 35213; Penal Code Section 211.
2. **The Board of Education** will pay the cost of replacing or repairing the property of an employee such as eyeglasses, hearing aids, dentures, watches, or articles of clothing necessarily worn or carried by the employee, or motor vehicles, when such items are damaged in the line of duty as a result of malicious acts, without fault of the employee. Such items as tape recorders or other teaching aids belonging to staff members are not included. Employees included in the certificated employees' bargaining unit should refer to their collective negotiations contract for information on requesting reimbursement for electronic hardware and other employee-owned classroom material.

C. GENERAL

1. **Originating Office.** Suggestions or questions concerning this procedure should be directed to the Risk Management Department, Office of School Site Support.
2. **Definition. Robbery:** "The felonious taking of personal property in the possession of another, from his person or immediate presence and against his will accomplished by means of force or fear" (Penal Code Section 211).
3. **Reimbursement Policy.** In accordance with Board of Education policy, reimbursement shall be subject to the following conditions:

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- a. **Amount of claim.** No payment shall be made for any item having a value of less than \$5 at the time of damage, nor shall any payment be made for repairs of less than \$5. The maximum payment for any one claim shall not exceed \$250, except in the case of motor vehicles, for which maximum payment shall not exceed \$500 (see C.3.b.[1]). Reimbursement for cash lost due to robbery shall not exceed \$50 and shall be made only upon submission of clear and convincing evidence of the amount of cash robbed. If an item is damaged beyond repair, the actual value at the time of the damage shall be paid, subject to above-noted restrictions.
- b. **Motor vehicle damage/stolen vehicles**
 - (1) Reimbursement for motor vehicles damaged or stolen shall be limited to payment for damages resulting from malicious acts of others while the employee is at work or performing work at a school-sponsored activity and the vehicle is parked on or adjacent to the school or other district premises. If the employee has insurance coverage for the loss or damage, a claim should be filed with the employee's insurance carrier. The district will pay the deductible amount up to the \$500 limit for covered losses.

Exclusions:

 - (a) Collision damage.
 - (b) Theft of or damage to car covers, spare tire covers, front-end masks, light bars, or other items not originally part of the vehicle.
 - (2) A School Police Services Department, Office of the Superintendent, report must be made within 24 hours and the case or report number must be included in the claim. Two estimates of repair cost and a copy of the employee's automobile insurance declaration page must be provided. The employee must assign to the district the right of subrogation to the extent of any payment made by the district.
- c. **Limitation on payment.** Reimbursement shall be made only for loss incurred both in the line of duty *and* through no fault of the employee.
- d. **Time limit.** Claims must be submitted within thirty calendar days of the date of loss.

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D. IMPLEMENTATION

1. **Employee** makes a School Police Services Department report and completes employee claim section of "Reimbursement for Damage/Loss to Employee's Property" (E.1., Attachment) in accordance with instructions thereon. In case of motor vehicle damage, indicates amount of insurance deductible; submits original and one copy to principal or department head.
2. **Principal or department head** signs form indicating verification of incident and damage. Approval indicates this is a valid claim against the district within the policy and conditions outlined in C.3.b.(1). Forwards original to the Risk Management Department.
3. **Risk Management Department** investigates claim as necessary. *If approved*, processes claim for reimbursement; *if not approved*, notifies employee.

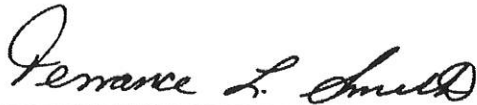
E. FORMS AND AUXILIARY REFERENCES

1. Reimbursement for Damage/Loss to Employee's Property (Attachment)

F. REPORTS AND RECORDS

1. Reimbursement for Damage/Loss to Employee's Property form, estimates, and employee's automobile insurance policy declaration page sent to the Risk Management Department via principal or department head, within thirty days of incident.

G. APPROVED BY



Chief of Staff, Terrance L. Smith
For the Superintendent of Public Education

SAN DIEGO UNIFIED SCHOOL DISTRICT
REIMBURSEMENT FOR DAMAGE/LOSS TO EMPLOYEE'S PROPERTY
(Reference Administrative District Procedure 2660)

This form must be submitted within 30 days of the incident or your request may be denied.

Employee Name: _____	Employee ID # (required): _____
Employee Address: _____	City: _____ Zip: _____
Home Phone: _____ Work Phone: _____	Job Title: _____
Assignment Location: _____ Name _____ Number _____	Location where incident occurred: _____
Date of Incident: _____	AMOUNT OF CLAIM: _____

MOTOR VEHICLE DAMAGE

All claims for motor vehicle damage require a School Police or San Diego Police Case Number. Incident must be reported to Police within 24 hours. Contact School Police at (619) 291-7678 or San Diego Police at (619) 531-2000. Two written estimates and a copy of your insurance declaration page must be attached in order to process claim.

Make/Model of Vehicle: _____ Year: _____ Vehicle License Number: _____

Police Case Number: _____ Your Comprehensive Insurance Deductible Amount: _____

Give details and extent of damage: _____

Two written estimates attached: _____ Insurance Declaration Page Attached: _____

DAMAGE TO PERSONAL PROPERTY

Receipts are required and must be attached.

Item(s) damaged: _____

Details of Incident: _____

Receipt(s) attached: _____

I certify the above information to be true to the best of my knowledge, and I assign to the San Diego Unified School District the right of subrogation to the extent of my payment made by the district. I understand that in the case of motor vehicle damage the district will pay my comprehensive insurance coverage deductible only up to a maximum of \$500.00 (If you do not have insurance coverage, the district will pay a maximum of \$500 for automobile damage.)

SIGNATURE OF EMPLOYEE: _____ DATE: _____

I certify that the information set forth above is correct to the best of my knowledge and that this is a reimbursement request within the term and conditions outlined in Administrative District Procedure 2660.

APPROVED: _____ DATE: _____
Principal or Department Head

APPROVED FOR PAYMENT: _____ DATE: _____ \$ _____
Risk Manager

SEND COMPLETED FORM WITH REQUIRED DOCUMENTS ATTACHED TO:

Revere Center
Room 7
Risk Management Department

