

MS TOW OPERATOR SURVIVOR FUND REQUEST FOR MONETARY ASSISTANCE



DEATH MUST HAVE OCCURRED WHILE THE DECEASED WAS ON THE JOB

Date of Submission:	Applying for: □ Survivor Fund
Name of the Deceased:	
Sex: □Male □ Female Date of	Birth Date of Death:
Name of Deceased's Legal Spouse (if	`applicable):
Name(s) and Age(s) of Deceased's Ch	nildren (if applicable):
	ked For:
Company Contact:	
Company Address:	
City:	
Phone: Fax:	E-mail:
Years in the Towing Industry: ☐ Less	s than 2 years \square 2 -5 years \square 5-10 years \square Greater than 10 years
Position of Deceased with the Compa	ny:
MS Towing and Recovery Association	n Member: □ Yes □ No
Name of Submitter:	Relationship to Deceased:
Address:	
City:	State: Zip:
Phone: Fax:	E-mail:
MS Towing & Recovery Professionals Phone: (662) 456-0199	Email: mstowingassociation@gmail.com Website: www.mstowingassociation.com

2809 S.Gloster St. Tupelo, MS 38801

Date of Incident:	Time:	□am □pm City:		State:
Road Type: □ Interstate	☐ State Hwy ☐ Coun	ty Rd □ State Rd □	☐ City Street ☐ Othe	er
Description of incident an	d any other facts (if any	y) you believe MTRP	A should be aware of:	
Documents attached:				
☐ Death Certificate				
☐ Police Report				
☐ Copy of Marriage		. (1.11.17)		
± •	tificate(s) for Dependen	it Child(ren)		
☐ Newspaper Article				
□ Other				1
*All available pertinent de	ocumenis snouta de atta	icnea to the submission	on. 11 is noi requirea io) submit att items.
****** This	Section Only Required	l For Survivor Fund N	Monetary Requests **:	*****
Name For Funds Distribut				
Address:				
City:	State:	Zip:	Country:	
Phone:	Fax:	E-mail	l:	
*Distribution should be m	nade to closest living rel	ative 18 or older. Ar	ny person other than sp	ouse or dependent
children must provide pro				
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	***************************************		*********	*********
I certify that the above infunderstand that review by award is discretionary, and made to me, I agree in adv	MTRPA is confidentiand that meeting the eligible	l, and that its decision bility criteria does not	n is final. I also underst guarantee an award.	stand that any Should an award be
Signature of Submitter		Date		

Privacy Information: Submitting information is strictly voluntary. By doing so, you are giving the MTRPA your permission to use the information for the intended purpose. If you do not want to give the MTRPA permission to use your information, simply do not provide it. However, not providing certain information may result in the MTRPA 's inability to provide you with the services you desire.

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PROCESSING FORM

SURVIVOR FUND REQUEST FOR MONETARY ASSISTANCE

FOR OFFICE USE ONLY

Date Received:	 		
Applying for: □ Survivor Fund □ W	Vall of the Fallen	□ Both	
Name of the Deceased:			
Date of Death:	City:		State:
MS Towing Operator Survivor Fu	nd		
Date Sent to Review Committee:		☐ Appro	oved Denied
Date Sent to Board of Directors:			oved Denied
Signature of MTRPA President		Date	_

MS Towing & Recovery Professionals

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MTRPA -Towing Operator Survivor Fund 2809 South Gloster Tupelo, MS 38801

NEXT OF KIN AFFIDAVIT

Name:			
(Last Name, First			
Address:			
City:	State:	Zip:	
Relationship to Deceased:			
l,		_, declare that:	
I am the next of kin of			, who died on or about
the day of	_,20		
As the next of kin, I am ent	itled to receive th	ne offered monetar	y assistance from the
Survivor Fund.			
Signature of Affiant		_	
 Date			

Survivor Fund Policies

Eligibility Requirements

To qualify for a financial assistance award from the MTRPA Towing Operators Survivor Fund, the deceased must fall into one of the following categories:



- Deceased must have been working as an operator or employee in any capacity with a motor vehicle towing company at the time of the event causing death.
- Deceased must have been working as an operator or employee in any capacity with a motor vehicle repossession company at the time of the event causing death.
- Deceased must have been working as an operator or employee in any capacity with a motor vehicle road service company engaged to work in the same capacity as the towing industry at the time of the event causing death.

Further, the deceased must have been on-duty or performing work directly associated with his/her position at the time of the event.

Qualifying Circumstances:

- Death that occurs during the act of loading and unloading a motor vehicle, equipment, material, animal, or non-motor vehicle to be towed or moved on site;
- Death that occurs during the act of transporting a motor vehicle, equipment, material, animal, or non-motor vehicle due to the negligence of another person (i.e.) accident as a result of other persons driving under the influence, careless driving, road rage, etc.);
- Death that occurs during the commission of recovery efforts of a motor vehicle, equipment, material, animal, or non-motor vehicle. Recoveries include, but are not limited to: mountain recoveries, body of water recoveries, culverts, fields, mud, etc.;
- Death that occurs while driving en-route to or from the scene of a call (i.e. accident as a result of another person's driving under the influence, careless driving, road rage, etc.);
- Death that occurs while performing service calls (i.e. tire change, unlock, jump start, etc.)
- Homicide that occurs at the hand of a customer, robber, or passerby while engaged in a call; Homicide that occurs at the hand of a customer, robber, or passerby while at the home office;
- Death that occurs while working in a company office, or at another company operated location, during the performance of work related duties;
- Death that occurs as a result of Infectious Disease that can be proven to have been contracted during performing duties;
- Death that occurs during recovery or cleanup efforts of natural disasters;

• Death that occurs days, months or years after disablement or serious injury that was directly caused by performing duties while on the job (death must be proven to be a direct result of those injuries or disablement).

Excluded Circumstances:

- Death that is a direct result of gross negligence on the part of the Tow Operator or employee including but not limited to: driving under the influence of drugs or alcohol, negligent driving, road rage, in the commission of a felony crime, etc.; Suicide; Homicide; deaths that are not job related, including, but not limited to, domestic homicide, home robbery, etc.; Additionally, the recipient of the death benefit must meet the following criteria:
- If only dependent age children are survivors, payment can be made to a trust in their name if it is established. The MTRPA will have no part in establishment of these trusts.
- Must be directly related to the deceased or spouse (common law accepted where recognized) of the deceased. Proof of relationship may be required and/or next of kin affidavit
- Recipient requests for funds must be postmarked within 90 days from the date of death.
- The person filling out the request for funds must fill out the application in its entirety and must include all forms required at the time of submission.

Only one award is permitted per death and the MTRPA is not responsible for additional claims from eligible persons. A reasonable effort will be made in each case to determine eligibility of the recipient and whether there are others eligible who should receive priority. Applications will be processed on a first received, first processed basis. Order of priority for distributions will be basically interpreted as spouse, children, parents and then siblings. Lacking applications from those others, the MTRPA Towing Operators Survivor Fund committee will vote on funds disbursement and all decisions of the committee are final. Once the vote is complete and payment has been processed, no additional claims or requests for funds associated with a reviewed event will be entertained.

Death benefit award shall be a fixed amount to be set annually at the MTRPA Board of Directors winter meeting. The current benefit amount is \$1,500 US Dollars for members and \$750 US Dollars for non members effective January 1st, 2018.

It is beyond the scope of the Survivor Fund to make automatic awards, however committee members may pro-actively contact employers of those killed in the line of service to communicate the availability of benefits. This contact will not be made directly with family members unless contact is first initiated by family members. All applicants will be required to complete an application form to ensure eligibility requirements are met and records are kept appropriately by the MTRPA.

The Survivor Fund committee shall have the right to review any and all exceptions to these guidelines on an individual basis.

The approval process for Survivor Fund applications will include the distribution of the submitted materials to the full committee by the director which will start a 2 week clock for each committee member to vote 'Yes', 'No' or 'Review'. If all members of the committee vote prior to the 2 week clock expiration, the majority vote will carry unless prior to the expiration of the 2 week clock three members of the committee vote 'Review'. Should three votes of 'Review' occur at any time prior to the end of the 2 week voting period, the matter will be moved to a review process for full committee review as a group. A call will be scheduled and the majority of the committee members must be present to have a discussion to resolve the matter in Review, including at least two of the persons who voted 'Review' in the original round of voting. Once the 2 week voting clock expires, if a majority of the committee has voted either 'Yes' or 'No', the vote shall carry and funds disbursement will be settled with that vote count. If there is no committee majority at the end of 2 weeks, the voting process will end when a single answer of 'Yes' or 'No' carries the majority of votes based on the overall size of the committee.