## TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control Department or Agency Crime Victims' Compe	ensation Commission
Rule No. 262-x-401	
Rule Title: Filing of Claims.  New X Amend Repeal Adop	ot by Reference
Would the absence of the proposed rule significantly Harm or endanger the public health, welfare, or safety?	Yes
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?	<u>Yes</u>
Is there another, less restrictive method of regulation available that could adequately protect the public?	No
Does the propounded rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree?	<u>No</u>
Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule?	<u>N/A</u>
Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?	<u>Yes</u>
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Does the proposed rule have an economic impact?	No
If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.	
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Certification of Authorized Official	
I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975, and that it conforms to all applicable filing requirements of the Administrative Procedures Division of the Legislative Reference Service.	
Signature of certifying officer Cassie T. Jones, Ed.D.  Date 5/3/4	
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## ALABAMA CRIME VICTIMS' COMPENSATION COMMISSION

## **NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 

262-x-4-.01 Filing of Claims.

**INTENDED ACTION:** 

Amend

<u>SUBSTANCE OF PROPOSED ACTION:</u> The Commission proposes to amend the rule to reflect the increases in compensation benefits pursuant to Act 2014-335.

<u>TIME, PLACE, MANNER OF PRESENTING VIEWS:</u> Interested persons may present their views in writing to the Alabama Crime Victims' Compensation Commission, 5845 Carmichael RD; Post Office Box 231267, Montgomery, Alabama 36123-1267, or oral comments at 334.290.4420.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE: Written comments shall be received until the close of record at 5:00 p.m. on July 7, 2014. All comments should be addressed to the contact person listed below or oral comments at 334.290.4420.

<u>CONTACT PERSON AT AGENCY:</u> Kim Z. Martin, General Counsel, Alabama Crime Victims' Compensation Commission, 5845 Carmichael RD; Post Office Box 231267, Montgomery, Alabama 36123-1267.

Cassie T. Jones, Ed.D Executive Director

## 262-X-4-.01 Filing Of Claims.

(1) A claim must be filed with the Commission within one (1) year after the death or injury upon which the claim is based or the Commission finds that there was good cause for the failure to file within that time. The date on which each claim is received by the Commission shall be documented. A completed and signed ACVCC application must be submitted in order for a compensation request to be processed. In the event that information is needed by the Commission that is not contained in the claim, said information shall be furnished to the Commission within 45 days of request of same. Failure to provide information within the time prescribed by these rules may, at the Commission's discretion, result in the dismissal of that claim.

(2) Separate claims may be filed for individual family members who are victims. However, no more than \$15,000.00 can be awarded per claim.

Author: Dr. Cassie T. Jones

**Statutory Authority:** *ALA. CODE* § 15-23-5(14) (1995)

History: Filed May 13, 2014