

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 14L0033

Date: September 30, 2014

Claimant /Victim DOROTHY L. WRIGHT
BY: (Atty) (Ins. Co.)
Address: 709 Kennolia Drive, SW, Atlanta, Georgia 30310
Subrogation: Claim for Property damage \$ 1,866.00 Bodily Injury \$
Date of Notice: 1/14/14 Method: Written, Proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 11/7/13 Place: 709 Kennolia Drive
Department WATERSHED MANAGEMENT Bureau: Drinking Water Office :
Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant alleges property damage sustained when her basement flooded due to a water main break. The investigation has determined that the City failed to properly assess the water issue on its initial visit to the location of the break. The water main was repaired on November 20, 2013.

INVESTIGATION:

Statements: City employee X Claimant X Others X Written Oral X
Pictures X Diagrams Reports: Police Dept Report X Other X
Traffic citations issued: City Driver Claimant Driver
Citation disposition: City Driver Claimant Driver

BASIS OF RECOMMENDATION:

Function: Governmental Ministerial X
Improper Notice More than Six Months Other Damages reasonable
City not involved Offer rejected Compromise settlement X
Repair/replacement by Ins. Co. Repair/replacement by City Forces
Claimant Negligent City Negligent X Joint Claim Abandoned

Respectfully submitted,

[Signature]
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ \$1,200.00 Adverse Account charged: General Fund Water & Sewer X Aviation
Claims Director/Manager: [Signature] Concur/date 10/3/14
Deputy City Attorney: [Signature] Concur/date 10/9/14
Committee Action: Council Action

RECORDED
JAN 14 2014
JAN 14 2014

RECEIVED
OFFICE OF
MUNICIPAL CLERK

gk

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, SW
Atlanta, Georgia 30303

RE: CLAIM FOR DAMAGES
Today's Date: 1-13-14

2014 JAN 14 PM 2:17

ENTERED - 1-22-14 - SB
14L0033 - G. BURNS

Assign to GEB
CAC 1/17/14

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount of \$ 1,866 property and/or \$ _____ bodily injury for which I contend the City is liable.

- Date of incident: 11-17-13 2. Time of incident: 5:15pm 3. Police called: no
- Location of incident (including street address): 709 Kennolia Dr. SW. At Ga 30310
- Name of your insurance company: State Farm Policy No. 11-KC-8317-8
- State what and how incident occurred: On the above date + Address we experience a water main break due to city end, that went on for 4 days. Causing flooding to our yard which came into our basement. Due to negligence of the watersted, they have agreed to do repairs. see Attached letters, pictures and estimates. This has not been a pleasant experience. This has cause a lot of suffering.
- ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle.

Your vehicle: _____
 (Make) (Year) (Tag Number) (Driver's Name)

City vehicle: _____
 (Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____

10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. Claims must be received within 6 months from the date of the event.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Dorothy L. Wright
Signature of Claimant

Dorothy L. Wright
(Print Claimant's Name)

709 Kennolia Dr. S.W.
(Address)

Atlanta Ga 30310
(City, State and Zip Code)

(Work Number) (Home Number)

404-752-9451

404-731-5698

Cell
Boneta Hines (daughter)

cc 03L0094