

00-*R*-1048

Entered - 6-5-98 - sb
CL00L0395 - DOBBS JORDAN

CLAIM OF: Lynn Quarles
201 Pryor Street
Atlanta, Georgia 30303

For damages alleged to have been sustained
as a result of a property damage incident on
May 14, 1998 at 167 Trinity Street.

THIS ADVERSED REPORT IS
APPROVED

BY: *Rosalind Rubens Newell*
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

CONSENT AGENDA

ADVERSED BY JUL 17 2000
CITY COUNCIL

ADVISED REPORT

Case # *R.S.A. #1*
Date *7/11/00*
City Council
Henry D. Wiley

CERTIFIED
JUL 17 2000
ATLANTA CITY COUNCIL PRESIDENT
James A. Parker

CERTIFIED
JUL 17 2000
Paul Douglas Adams
MUNICIPAL CLERK



OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC
MUNICIPAL CLERK

55 TRINITY AVENUE, S.W.
SECOND FLOOR, EAST
SUITE 2700
ATLANTA, GEORGIA 30335
(404) 330-6033
FAX (404) 658-6103

July 28, 2000

Lynn Quarles
201 Pryor St.
Atlanta, GA 30303

00-R-1048

Dear Ms. Quarles:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on July 17, 2000. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the City Attorney's Office/Claims Division at (404) 330-6400.

Sincerely,

Rhonda Dauphin Johnson, CMC
Municipal Clerk

cc: Claims Division/Law Department

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 98L0395

Date: June 26, 2000

Claimant /Victim Lynn Quarles
BY: (Atty) (Ins. Co.)
Address: 201 Pryor Street, Atlanta, Georgia 30303
Subrogation: Claim for Property damage \$ unspecified Bodily Injury \$
Date of Notice: 5-19-98 Method: Written, Proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 5-14-98 Place: 167 Trinity Street
Department unknown Division
Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant alleges that he sustained damages as a result of rock and dirt being thrown against his property due to a collapsed city water main. The claimant has abandoned his claim.

INVESTIGATION:

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

BASIS OF RECOMMENDATION:

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

Respectfully submitted,

[Handwritten Signature]
INVESTIGATOR - DOBBS JORDAN

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2J01 2H01
Claims Manager: [Signature] Concur/date 06-26-00
Committee Action: Council Action

COUNCIL OF THE CITY OF ATLANTA
CLERK OF COUNCIL
City Hall
68 Mitchell Street, S.W.
Atlanta, GA 30335

RE: CLAIM FOR DAMAGES

Oatis
5/22/98
Du

RECEIVED
MAY 19 1998

TODAY'S DATE: 5-18-98
ENTERED - 6-5-98 - SB
98L0395 - ANTHONY OATIS

Dear Sir:

This is to notify the MUNICIPALITY of Atlanta that I have suffered damages in the sum of \$ _____ property and/or (S) _____ bodily injury for which I contend the City is liable.

- Date of incident: 5 14th 98 (month day year) 2. Police called X (yes) (No)
- Location of incident: 167 TRENITY ST ATLANTA, GA.
- Name of your insurance company _____ Policy # _____
- State what and how incident occurred: BACKHOE BROKE WATER MAIN AT 167 TRENITY. WATER SENT ROCK AND DIRT ONTO BUILDING + WINDOWS. DIRT NEEDS (use other side if necessary)

6. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE STATEMENTS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

7. The registered owner must make the claim for vehicle damages. Complete the following and attached two (2) estimates of repair.
Your vehicle: _____
(make) (year) (tag#) (driver's name)

City vehicle: _____
(make) (driver's name) (department)

8. Witness: _____
(name) (address) (phone)

9. The acknowledgment of this claim in no way waives the Governmental 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).

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

10. THIS CLAIM SHOULD BE MAILED IMMEDIATELY TO THE ADDRESS SHOWN ABOVE

Anthony Oatis (SEAL)
(claimant)
201 PRYOR ST
(address)
Atlanta, GA 30303
(city) (state) (zip)
404-688-0472
(home) (phone) (work)