



CITY OF ATLANTA
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

October 26, 2000

E. Laurino
2347 Virginia Place
Atlanta, GA 30305

00-R-1599

Dear Mr. Laurino:

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 October 16, 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**

RCS# 2337
10/16/00
8:35 PM

Atlanta City Council

Regular Session

MUTIPLE CLAIMS WITH FAVORABLE/Unfavor recommend
00-R-1599 ITEMS 1-29
ADOPT

YEAS: 13
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 1
EXCUSED: 1
ABSENT 1

Y McCarty	Y Dorsey	Y Moore	Y Thomas
Y Starnes	Y Woolard	B Martin	Y Emmons
Y Bond	Y Morris	Y Maddox	E Alexander
Y Winslow	Y Muller	Y Boazman	NV Pitts

MUTIPLE

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0069

Date: 9/28/00

Claimant /Victim Ms. E. Laurino
BY: (Atty)
Address: 2347 Virginia Place, Atlanta, GA 30305
Subrogation: Claim for Property damage \$ Bodily Injury \$
Date of Notice: 01/27/99 Method: Written, proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence Summer/Fall 1998 Place: 2337 Virginia Place
Department Unknown Division:
Employee involved Disciplinary Action:

NATURE OF CLAIM: The Claimant alleges City worker exposed the roots to a Maple tree, and that she was concerned that the tree would die. However, the Clamant has failed to furnish information necessary to substantiate her claim.

INVESTIGATION:

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

BASIS OF RECOMMENDATION:

Function: Governmental X 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,

Alexis Holmes
INVESTIGATOR - ALEXIS HOLMES

RECOMMENDATION:

Pay \$ Advers X Account charged: 1A01 2J01 2H01
Claims Manager: [Signature] Concur/date 09-29-00
Committee Action: Council Action

COUNCIL OF THE CITY OF ATLANTA
OFFICE OF THE MUNICIPAL CLERK
55 Trinity Avenue, S.W.
Suite 2700
Atlanta, Georgia 30335

Jordan
02/09/99
RE: CLAIM FOR DAMAGES

TODAY'S DATE: 1/22/99

Dear Sir/Madame:

01-28-99

ENTERED - 2-10-99 - SB
99L0069 - DOBBS JORDAN

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

1. Date of incident: Summer/Fall/98 2. Police called _____ X
(month day year) yes no

3. Location of incident: Front yard

4. Name of your insurance company _____ Policy # _____

5. State what and how incident occurred: While doing work at 2337 Virginia Place
the landscaping in my front yard was destroyed. I am concerned that the roots to a large
maple tree will result in a dead tree this Spring. I will send you any estimates of
repairs at that time.

(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 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 acknowledgement 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

Clawson (SEAL)
(claimant)

2347 Virginia Place
(address)

Atlanta GA 30305
(city) (state) (zip)

404-231-4754 404-609-9898
(home) (phone) (work)

00- -1599

Entered - 9/29/00 - sb
CL99L0069 - ALEXIS HOLMES

CLAIM OF: E. Laurino
2347 Virginia Place
Atlanta, Georgia 30305

00- R-1599

For damages alleged to have been sustained as a result of exposed roots
of a Maple tree at 2337 Virginia Place, Atlanta, Georgia 30305.

APPROVED: SUSAN PEASE LANGFORD
CITY ATTORNEY

THIS ADVERSED REPORT IS APPROVED

BY: Rosalind R Newell
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY
Regular Report Agenda

ADVERSE REPORT

cc: P. Sa L.A

10/16/00
Ver: Cela Henderson

[Signature]
[Signature]
[Signature]

ADVERSED OCT 16 2000

CERTIFIED
OCT 16 2000
ATLANTA CITY COUNCIL PRESIDENT
[Signature]

CERTIFIED
OCT 16 2000
Ronda Daphin Johnson
MUNICIPAL CLERK