



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

Michael R. Galambos
763 Byrnwyck Road
Atlanta, GA 30319

00-R-1628

Dear Mr. Galambos:

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
ITEMS 1-29
ADOPT

00-R-1628

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. 00L0356

Date: September 26, 2000

Claimant /Victim MICHAEL R. GALAMBOS
BY: (Atty) (Ins. Co.)
Address: 763 Bynwyck Road, Atlanta, Georgia 30319
Subrogation: Claim for Property damage \$ 533.31 Bodily Injury \$
Date of Notice: 6/1/00 Method: Written, proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 4/24/00 Place: Peachtree Road, NE & Bolling Way, NE
Department PUBLIC WORKS Division: STREET
Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant alleges that his vehicle sustained damage when he drove through a sink hole in the roadway that was under construction and left in an unsafe condition. An investigation determined that Media One performed work at the incident location. Claimant has been advised of same and his claim has been forwarded to Media One for resolution.

INVESTIGATION:

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

Respectfully submitted,

Gwendolyn Burns
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

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

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

BURNS
06/09/00
DB

* Today's Date: 5/23/00
Delay in mailing due to
obtaining appropriate form!!

Dear Municipal Clerk:

06-01-00 110:50 AM
ENTERED - 6-12-00 - SB
00L0356 - GWEN BURNS

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 535.31 property and/or
\$ 0 bodily injury for which I contend the City is liable. See copy of repair invoice.

1. Date of incident: 4/24/00 2. Time of Incident: 9:15 PM 3. Police called: X
(month/day/year) Incident # 001152055 Yes No

4. Location of incident (including street address): 3111 Peachtree Rd at intersection Balling Rd and
Peachtree Rd

5. Name of your insurance company: Allstate Policy No. 045 044240 09/13

6. State what and how incident occurred: Driving North on Peachtree Rd @ 29:15 PM
when my car entered a large hole created by construction
which was unmarked and uncovered. The (R) Front wheel
rim was bent and tire immediately flattened. Hole was in
Right hand lane of Peachtree Rd

7. 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 (copy of the current tag receipt or title).

Your vehicle: Maxima 98 2276 SP Michael R. Galambos
(Make) (Year) (Tag Number) (Driver's Name)

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

9. Witness: * Hosace Scott III 360 Englewood Ave Atlanta 404-624-0755
(Name) (Address) (Telephone Number)
City of Atlanta Roads & Highways Employee

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. This claim should be mailed immediately to the address shown above.

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

Michael R Galambos
Signature of Claimant

Michael R Galambos
(Print Claimant's Name)

765 Byronwyck Rd
(Address)

Atlanta, Ge. 30319
(City, State and Zip Code)

404-355-3200 404-252-3283
(Work Number) (Home Number)

00-R-1628

Entered -06-12-00 - sb
CL 00L0356 - GWENDOLYN BURNS

00-R-1628

CLAIM OF: MICHAEL R. GALAMBOS
763 Byrnwyck Road
Atlanta, Georgia 30319

For damages alleged to have been sustained as a result of a sink hole in the roadway that was left in an open and unsafe condition on April 24, 2000 at the intersection of Peachtree Road, NE & Bolling Way, NE..

THIS ADVERSED REPORT IS
APPROVED

BY: Rosalind R Newell
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

Regular Report Agenda

ADVERSED REPORT

COM. P. 50 h.A

DATE 10/16/00

V. Cleta Anderson

[Signature]
[Signature]
[Signature]

ADVERSED REPORT OCT 16 2000

CERTIFIED
OCT 16 2000
ATLANTA CITY COUNCIL PRESIDENT
[Signature]

CERTIFIED
OCT 16 2000
[Signature]
MUNICIPAL CLERK