

01- R-1259

Entered - 7-23-01 - sb
01L0475 - ALEXIS HOLMES

CLAIM OF: **JAMES A. MOSHER**
567 Grant Street
Atlanta, Georgia 30312

For damages alleged to have been sustained as a result of a vehicular accident on June 28, 2001 at I-75-85 Northbound Expressway, SW.

THIS ADVERSE REPORT IS APPROVED

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

ADVERSE BY
CITY COUNCIL SEP 04 2001

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

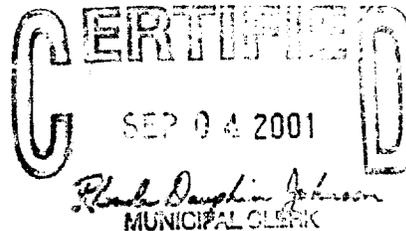
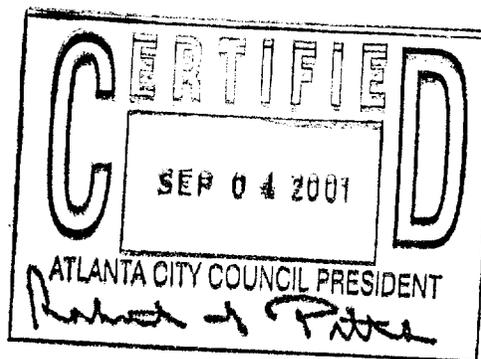
DATE: SEP 04 2001

CHAIR: *C. J. Martin*

[Signature]

[Signature]

Chela Hines





**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**

September 7, 2001

James A. Mosher
567 Grant Street
Atlanta, Georgia 30312

01-R-1259

Dear Mr. Mosher:

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 September 4, 2001. 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.

Yours very truly,

Rhonda Dauphin Johnson, CMC
Municipal Clerk

cc: **Claims Division/Law Department**

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0475

Date: 8/1/01

Claimant /Victim JAMES A. MOSHER
BY: (Atty)
Address: 567 Grant Street Atlanta, Georgia 30312
Subrogation: Claim for Property damage \$ 9,475.06 Bodily Injury \$
Date of Notice: 7/11/01 Method: Written, proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 6/28/01 Place: I 75-85 Northbound Expressway, SW
Department Public Works Division: Sewer Operations
Employee involved Wendzell D. Handspike Disciplinary Action: Pending

NATURE OF CLAIM: The claimant sustained damage to his vehicle when he was struck from behind by a City vehicle that was experiencing brake problems. The claimant has elected to be reimbursed by his insurance carrier for his damages.

INVESTIGATION:

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

BASIS OF RECOMMENDATION:

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

Respectfully submitted,

Alexis Holmes
INVESTIGATOR - ALEXIS HOLMES

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2J01 2H01
Claims Manager: Concur/date 08-01-01
Committee Action: Council Action

HOLMES
6/2/01

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

RE: CLAIM FOR DAMAGES

RECEIVED

JUL 11 2001

Today's Date: 7-6-01

MUNICIPAL CLERK

ENTERED - 7-23-01 - SB
01L0475 - ALEXIS HOLMES

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 9,475⁰⁶ + Rental Car fees property and/or \$ undetermined bodily injury for which I contend the City is liable.

1. Date of incident: 06/28/01 2. Time of Incident: 9:40AM 3. Police called: ✓
(month/day/year) Yes No

4. Location of incident (including street address): I 75 No. Bound BEFORE EDGEWOOD AVE EXIT

5. Name of your insurance company: AIU INSURANCE Co Policy No. 901-05-77

6. State what and how incident occurred: MY CAR WAS STOPPED IN TRAFFIC. CITY DUMP TRUCK RAN INTO BACK OF CAR WHICH PUSHED IT FORWARD & THEN HIT ME AGAIN. HE WAS TRAVELLING FREEWAY SPEED + THE CAR + I TOOK A SEVERE JOLT - HE, THE DRIVER OF THE TRUCK SAID HIS BRAKES FAILED.

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: LINCOLN TOWN CAR Sig 1999 923PXE 028057855
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: WENDZELL HANDSPIKE PUBLIC WORKS | SEWER
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____
(Name) (Address) (Telephone Number)

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.

James A. Mosher
Signature of Claimant

JAMES A. MOSHER
(Print Claimant's Name)

567 GRANT ST
(Address)

ATLANTA, Ga. 30312
(City, State and Zip Code)

C) 404 = 234-4416 H) 404 = 223-3537
(Work Number) (Home Number)

01-R-1259

4) 234-4416

RCS# 3092
9/04/01
3:36 PM

Atlanta City Council

Regular Session

MULTIPLE

Public Safety Consent Agenda except #15

1259

ADOPT

YEAS: 15
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 1
EXCUSED: 0
ABSENT 0

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

MULTIPLE

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