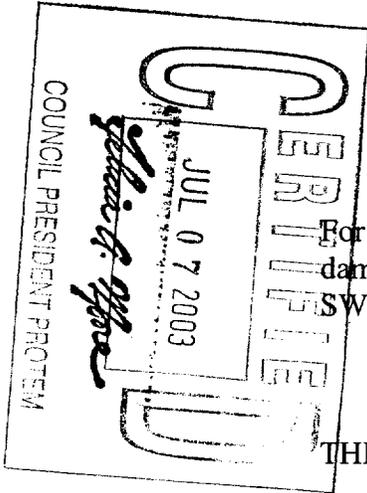


Entered - 05/30/03 - sb
CL03L0389 - DIANNE C. MITCHELL

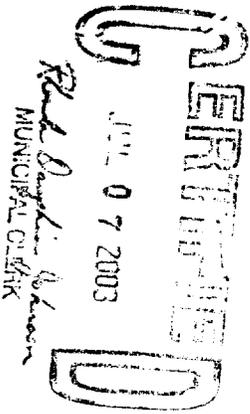
03-12-0998

CLAIM OF: **JAMES HAYNES**
225 Ralph David Abernathy Boulevard, SW
#9
Atlanta, Georgia 30312



For damages alleged to have been sustained as a result of vehicular damage due to a storm drain on June 21, 2002 at 759 Pryor Street, SW.

THIS ADVERSED REPORT IS APPROVED



BY: 
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

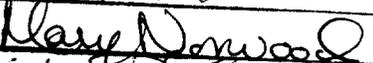
ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 7/1/03

CHAIR: _____


C. T. Moore


Mary Dowwood


Clara Stanslow

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 03L0389

Date: June 6, 2003

Claimant /Victim JAMES HAYNES

BY: (Atty)(Ins. Co.) _____

Address: 225 Ralph David Abernathy Boulevard, SW, #9, Atlanta, Georgia 30312

Subrogation: _____ Claim for Property damage \$ 57.99 Bodily Injury \$ _____

Date of Notice: 05/27/03 Method: Written, proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) _____

Date of Occurrence 06/21 /02 Place: 759 Pryor Street, SW

Department Watershed Management Bureau: Sewer Operations

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: The claimant alleges his vehicle was damage due to driving over a storm drain. However, the claim as presented does not comply with the requirements of notice as set forth in O.C.G.A. §36-33-5, in that the six month statute of limitations expired prior to receipt of the claim.

INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____

Pictures _____ 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 X Other _____ Damages reasonable _____

City not involved _____ Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

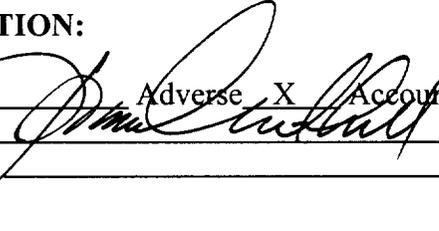
Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____ 2P01 _____

Claims Manager:  Concur/date 06/26/03

Committee Action: _____ Council Action _____