

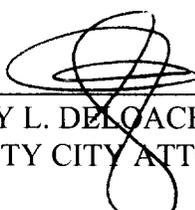
Entered - 04/29/04 - sb
CL - 4L0297 LISA CARTER

CLAIM OF: WESLEY FOWLER
2938 Heather Drive
East Point, Georgia 30344

04-R -1531

For damages alleged to have been sustained during an accident due to tree logs in the roadway on March 31, 2004 at 2240 Maxwell Avenue.

THIS ADVERSED REPORT IS APPROVED

BY: 
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

ADVERSED BY
CITY COUNCIL

SEP 07 2004

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 5/31/04

CHAIR: P. V. [Signature]

Jayson Sheber

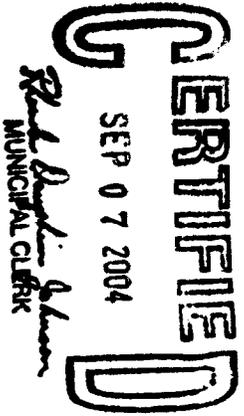
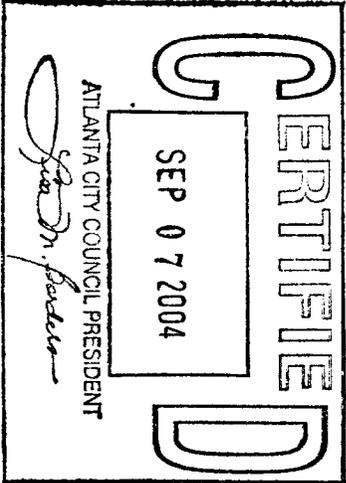
Way [Signature]

C. F. Marlo

[Signature]

Carla [Signature]

[Signature]



DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 04L0297

Date: August 17, 2004

Claimant /Victim WESLEY FOWLER

BY: (Atty) (Ins. Co.)

Address: 2938 Heather Drive East Point, Georgia 30344

Subrogation: Claim for Property damage \$ 2,215.00 Bodily Injury \$

Date of Notice: 04/27/04 Method: Written, proper X Improper

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

Date of Occurrence 03/31/04 Place: 2240 Maxwell Avenue, SW

Department Fire Services Bureau: Division:

Employee involved Disciplinary Action:

NATURE OF CLAIM: The claimant alleges that he sustained damages as the result of tree logs in the roadway at 2240 Maxwell Avenue, SW. An investigation determined that the tree was removed by Atlanta Fire Department and the tree logs were placed in a secured location out of the roadway. Furthermore, the city is immune from liability as set forth in O.C.G.A. §36-33-1.

INVESTIGATION:

Statements: City employee X Claimant Others X Written Oral X

Pictures X Diagrams Reports: Police X Dept Report X 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 X 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,

[Handwritten signature of Lisa Carter]

INVESTIGATOR - LISA CARTER

RECOMMENDATION:

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

Claims Manager Concur/date 08/19/04

Committee Action: Council Action

Post Mark Date _____
By _____

CARTER
04/28/04
R

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

RECEIVED

RE: CLAIM FOR DAMAGES

Today's Date: _____

APR 28 2004

ENTERED - 4-29-04 - SB
04L0297 - LISA CARTER

Dear Municipal Clerk:

MUNICIPAL CLERK

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

1. Date of incident: 3/31/04 (month/day/year) 2. Time of Incident: 14:49 3. Police called: Yes No

4. Location of incident (including street address): 2240 Maxwell Ave. SW, ATL. 30331

5. Name of your insurance company: Progressive Policy No. 31157945-4

6. State what and how incident occurred: Headed South on Maxwell, Fire Dept. Cut Down a Tree, Left logs in street. Went around one log. Hit the second log. My steering wheel went out of control + hit a tree. Truck turned over, + was totaled.

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: F150 1983 Wesley Fowler
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: Police Vehicle Clay-AB3548 Police
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: Willie Curry 2245 Maxwell Dr. Atlanta Ga. 30311 404 344-1210
(Name) (Address) (Telephone Number)

10. The acknowledgment 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. Claims must be received within 6 months of the event.

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

Wesley Fowler
Signature of Claimant

Wesley Fowler
(Print Claimant's Name)

2938 Heather Dr
(Address)

East Point, Ga. 30344
(City, State and Zip Code)

404 346-7300 404 344-1569
(Work Number) (Home Number)



OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC
MUNICIPAL CLERK

September 14, 2004

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

Wesley Fowler
2938 Heather Drive
East Point, GA 30344

04-R-1531

Dear Mr. Fowler:

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 07, 2004. 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