



MUNICIPAL CLERK
ATLANTA, GEORGIA

04-R-0583

A RESOLUTION

BY PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

BE IT RESOLVED BY the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **Robbie J. Bivins** in the sum of **\$602.20** settlement and satisfaction of all claims, past, present and future, of every kind and character, for damages alleged to have been sustained as a **result of a City Vehicle damaging the lawn on February 2, 2004 at 1679 Mill Acres Drive, SW** as set forth in the within claim; said sum taken from and charged to Account 2P01/529017/T31001, Settlement of Suits and Claims, Department of Law.

A true copy,

Municipal Clerk

ADOPTED by the Council
APPROVED by the Mayor

April 19, 2004
April 27, 2004

**MUNICIPAL CLERK
ATLANTA, GEORGIA**

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DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 04L0136

Date: March 8, 2004

Claimant /Victim ROBBIE J. BIVINS

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

Address: 1679 Mill Acres Drive, SW, Atlanta, Georgia 30311

Subrogation: _____ Claim for Property damage \$ 602.20 Bodily Injury \$ _____

Date of Notice: 02/19/04 Method: Written, proper X Improper _____

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

Date of Occurrence 02/15/04 Place: 1679 Mill Acres Drive, SW

Department Public Works Bureau: Solid Waste Services

Employee involved Ashly Render Disciplinary Action: Pending

NATURE OF CLAIM: The driver of the City vehicle failed to set the parking brake when he exited the City vehicle to assist in the emptying of the Herbie-Curbies at the above location. As a consequence, the vehicle rolled across the claimant's yard causing damages in the above amount.

INVESTIGATION:

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

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 _____ Ministerial X

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 _____

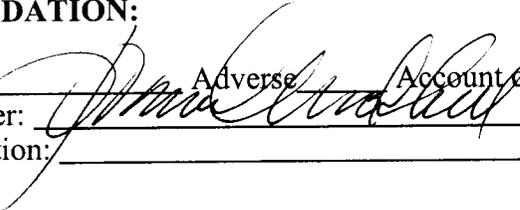
Claimant Negligent _____ City Negligent X Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ 602.20 Adverse _____ Account charged: 1A01 _____ 2J01 _____ 2H01 _____ 2P01 X

Claims Manager:  Concur/date 03/11/04

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

FEB 19 2004 Today's Date: _____

Mitchell
02/26/04

[Signature]

ENTERED - 3-1-04 - SB
04L0136 - DIANNE MITCHELL

Dear 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: Feb 5, 2004 (month/day/year)
- 2. Time of Incident: _____
- 3. Police called: Yes No
- 4. Location of incident (including street address): 1679 Mill Acres Dr. S.W. ATL. GA. 30311
- 5. Name of your insurance company: _____ Policy No. _____
- 6. State what and how incident occurred: see police report (attached)

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: _____ (Make) _____ (Year) _____ (Tag Number) _____ (Driver's Name)

City vehicle: _____ (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.

Robbie J. Bivins
Signature of Claimant

Robbie J. Bivins
(Print Claimant's Name)

1679 Mill Acres Dr. S.W.
(Address)

Atlanta, Ga. 30311
(City, State and Zip Code)

404 758-9386
(Work Number) (Home Number)

Entered - 03/01/04 - sb
CL04L0136 - DIANNE C. MITCHELL

CLAIM OF: **ROBBIE J. BIVINS**
1679 Mill Acres Drive, SW
Atlanta, Georgia 30311

04-*R*-0583

ADOPTED BY
APR 19 2004
COUNCIL

For damages alleged to have been sustained as a result of a City vehicle damaging the lawn on February 2, 2004 at 1679 Mill Acres Drive, SW.

BY PUBLIC SAFETY AND
LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **ROBBIE J. BIVINS** the sum of **\$602.20** in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a City vehicle damaging the lawn on February 2, 2004 at 1679 Mill Acres Drive, SW as is more particularly set forth in the within claim; said sum taken from and charged to account **2P01/529017/T31001**.

APPROVED: **LINDA K. DISANTIS**
CITY ATTORNEY

BY: _____
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

CERTIFIED
APR 19 2004
COUNCIL PRESIDENT PROTREM

CERTIFIED
APR 19 2004
Municipal Clerk

FAVORABLE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 3/30/04
CHAIR: _____

APPROVED
[Signature]
APR 27 2004
MAYOR