

RHONDA DAUPHIN JOHNSON, CMC
MUNICIPAL CLERK



OFFICE OF MUNICIPAL CLERK

April 22, 2004

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

Aretha M. Towns
1549 Newton Avenue, SE
Atlanta, GA 30315

04-R-0555

Dear Ms. Towns:

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 April 19, 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

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0666

Date: March 16, 2004

Claimant /Victim ARETHA M. TOWNS

BY: (Atty) (Ins. Co.)

Address: 1549 Newton Avenue, SE, Atlanta, Georgia 30315

Subrogation: Claim for Property damage \$ 35,000.00 Bodily Injury \$

Date of Notice: 10/14/99 Method: Written, Proper Improper X

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

Date of Occurrence 7/15/95 Place: 1549 Newton Avenue, SE

Department WATERSHED MANAGEMENT Bureau: Sewer Operations

Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant alleges that she sustained property damage when her home was structurally compromised during the construction phase of the reconnecting of a sanitary sewer line. However, the claim fails to meet the requirements of notice as set forth in O.C.G.A. §36-33-5 as the statute of limitation expired before receipt of the claim.

INVESTIGATION:

Statements: City employee Claimant Others Written Oral X

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 X 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,

Gwendolyn Burns
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2PO1 2J01 2H01

Claims Manager: Concur/date 03/17/04

Committee Action: Council Action

RECEIVED OCT 14 1999

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

RE: CLAIM FOR DAMAGES

BURNS
10/13/99
10/14/99

Today's Date: 10/13/99

ENTERED - 10-21-99 - SB
99L0666 - GWEN BURNS

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 35,000.00 property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 7/15/95 (month/day/year) 2. Police called: Yes No

3. Location of incident: 1549 NEWTON AVE SE ATLANTA 30316

4. Name of your insurance company: _____ Policy No. _____

5. State what and how incident occurred: CITY OF ATLANTA WAS DOING WORK ON A SANITARY SEWAGE CONNECTION FROM THE FRONT YARD, ALONG SIDE THE HOUSE TO THE FAR RIGHT SIDE OF THE BACKYARD, BECAUSE OF THE WORK AND DEEP DRILLING IT CAUSED THE HOUSE TO SEPARATE ON ONE

6. 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! A CRACK IN THE AND BACK OF HOUSE FOUNDATION.

7. 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).

HOUSE
Your vehicle: _____
(make) (year) (tag number) (driver's name)

City vehicle: _____
(make) (City driver's name) (department/bureau)

8. Witness: _____
(name) (address) (telephone number)

9. 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).

10. This claim should be mailed immediately to the address shown above. LUCILLE G. TOWNS

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

ARETHA M. TOWNS
(claimant's name)

Robert Towns

1549 NEWTON AVE SE
(address)

ATLANTA, GA
(city and state)

[Signature]

04-R-0555

AMT 7907-9490 4627-5674
(work number) (home number)

LGT 4616-4647 4627-7773

Entered -10-21-99 - sb
CL 99L0666 - GWENDOLYN BURNS

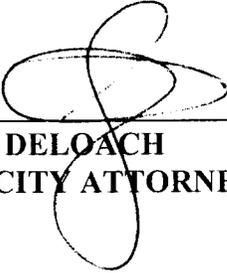
CLAIM OF: ARETHA M. TOWNS
1549 Newton Avenue, SE
Atlanta, Georgia 30315

04-12-0555

For property damages alleged to have been sustained due to a
sanitary sewer reconnection project on July 15, 1995 at 1549
Newton Avenue, SE.

THIS ADVERSED REPORT IS APPROVED

BY:


JERRY L. DELOACH
DEPUTY CITY ATTORNEY

CERTIFIED
APR 19 2001

Ruth Douglas Johnson
MUNICIPAL CLERK

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 3/30/04

CHAIR: *[Signature]*

[Signature]
[Signature]
[Signature]

[Signature]

APR 19 2004

CIVIL PRESIDENTIAL PROGRAM