

OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC
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

Sylvia Kelly
1791 North Olympian Way, SW
Atlanta, GA 30310

04-R-0559

Dear Ms. Kelly:

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

RCS# 5585
4/19/04
3:03 PM

Atlanta City Council

Regular Session

CONSENT I

CONSENT I PG(S) 1-18, EXCEPT:04-R-0538
04-O-0487 04-R-0473
ADOPT

YEAS: 14
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 2
EXCUSED: 0
ABSENT 0

Y Smith	Y Archibong	Y Moore	Y Mitchell
Y Starnes	NV Fauver	Y Martin	Y Norwood
Y Young	Y Shook	Y Maddox	Y Willis
Y Winslow	Y Muller	Y Boazman	NV Woolard

CONSENT I

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 03L0528

Date: March 16, 2004

Claimant /Victim SYLVIA KELLY
BY: (Atty) (Ins. Co.) _____
Address: 1791 North Olympian Way, SW Atlanta, Georgia 30310
Subrogation: _____ Claim for Property damage \$ 335.00 Bodily Injury \$ _____
Date of Notice: 06/26/03 Method: Written, proper X Improper _____
Conforms to Notice: O.C.G.A. §36-33-5 _____ X Ante Litem (6 Mo.) _____ X
Date of Occurrence 05/09/03 & 05/23/03 Place: 1791 North Olympian Way, SW
Department Watershed Management Bureau: _____ Division: Sewer Operations
Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: The claimant alleges that she sustained damages as a result of flooding in her basement at 1791 North Olympian Way, SW. An investigation determined that the source of the flooding is due to an improperly maintained private drop-inlet, for which the claimant is responsible.

INVESTIGATION:

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

BASIS OF RECOMMENDATION:

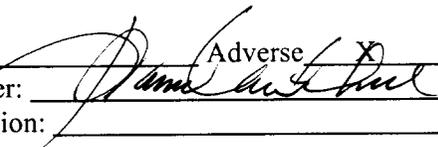
Function: Governmental X Ministerial _____
Improper Notice _____ More than Six Months _____ Other X Damages reasonable _____
City not involved X Offer rejected _____ Compromise settlement _____
Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____
Claimant Negligent _____ City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

Respectfully submitted,



INVESTIGATOR - LISA CARTER

RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____
Claims Manager:  Concur/date 03/17/04
Committee Action: _____ Council Action _____

CARTER
06/26/03

**COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK**

City Hall
55 Trinity Avenue, SW
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: 06-22-03

ENTERED - 06-26-03 - DP
03L0528 - LISA CARTER

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 335.⁰⁰ property
and/or \$ _____ bodily injury for which I contend the City is liable.

1. Date of incident: 5-9-5-23-03 2. Time of Incident: N/A 3. Police called: _____ Yes No
(month/day/year)

4. Location of incident (including street address): 1791 N. OLYMPIAN WAY S.W.,
ATLANTA, GA. 30310

5. Name of your insurance company: State Farm Ins. Co. Policy No. 008582-36-27

6. State what and how incident occurred: Storm water (From Heavy Rain) back-up,
Flooded basement, damaging the Furnace.
Contractor's estimate to repair is 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 vehicle registration).

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 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.

Sylvia Kelly
Signature of Claimant

Sylvia Kelly
(Print Claimant's Name)

1791 N. OLYMPIAN WAY SW.
(Address)

ATLANTA, GA. 30310
(City, State and Zip Code)

(4) 848-5112 (4) 691-2735
(Work Number) (Home Number)

NA: Attachment (Contractor's Estimate)

Date: June 23, 2003

RECEIVED JUN 24 2003

To: Sherry or Dawn
City of Atlanta Law Dept/Claims

From: Debra Kelly

Subject: Property damage due to storm water
back-up - 1791 N. olympian way S.W.
Atlanta, GA. 30310

Please find attached the following:

- ① City of Atlanta claim form, for damages incurred to the above subject property.
- ② Copy of Contractor's estimate to repair water damage to furnace, located at the above subject property.

Please accept the above mentioned documentation as a request for the City of Atlanta to forward to me a check in the amount of \$335.00, representing the amount necessary to repair my furnace.

Your immediate attention given this matter would be greatly appreciated.

You may contact me at (404) 691-2735, if additional information is needed.

Fax NO: (404) 658-7082

No. of pages (including cover sheet) 3

Entered - 06/23/03- sb
CL - 03L0528 LISA CARTER

CLAIM OF: SYLVIA KELLY
1791 North Olympian Way, SW
Atlanta, Georgia 30310

04-*R*-0559

For damages alleged to have been sustained as a result of flooding on May 9, 2003 and May 23, 2003 at 1791 North Olympian Way, SW.

THIS ADVERSED REPORT IS APPROVED

BY: _____
JERRY L. DELOACH
DEPUTY CITY ATTORNEY



CERTIFIED
APR 10 2004

COUNCIL RESIDENT PROBLEM

CERTIFIED
APR 10 2004

MUNICIPAL CLERK

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 3/30/04

CHAIR: [Signature]

[Signature]

[Signature]

[Signature]

[Signature]

APR 19 2004

APR 19 2004