

04-R-0668

Entered - 03/03/04 - sb
CL - 04L0159 - LISA CARTER

CLAIM OF: STATE FARM INSURANCE COMPANIES
as subrogee of Grant Lamont Winrow
11350 Johns Creek Parkway
Duluth, Georgia 30098

For damages alleged to have been sustained as a result of an automobile accident on December 8, 2002 at the intersection of 10th Street and Juniper Street.

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 **STATE FARM INSURANCE COMPANIES as subrogee of Grant Lamont Winrow** the sum of \$6,190.50 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for vehicular damages alleged to have been sustained as a result of an automobile accident on December 8, 2002 at the intersection of 10th Street and Juniper Street as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: LINDA K. DISANTIS
CITY ATTORNEY

BY: 
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

FAVORABLE REPORT

COMM: P.S.L.A.

DATE: 4/27/04

CHAIR: Etz

Her Sh...

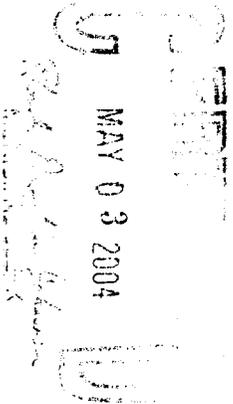
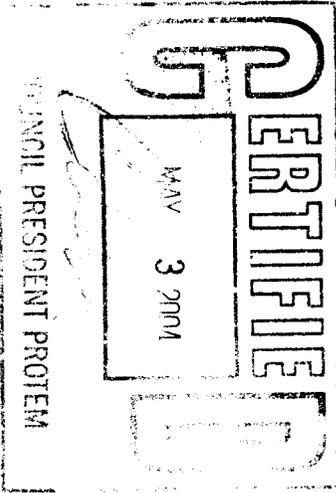
Grant Lamont Winrow

Lisa Carter

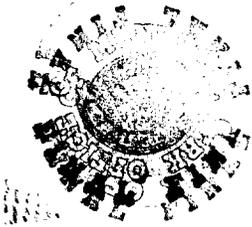
Clara Henderson

APPROVED

MAY 11 2004
MAYOR



ADOPTED BY
MAY 3 2004
COUNCIL



**MUNICIPAL CLERK
ATLANTA, GEORGIA**

04-R-0668

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 **State Farm Insurance Companies as subrogee of Grant Lamont Winrow** in the sum of **\$6,190.50** 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 an automobile accident on December 8, 2002 at the intersection of 10th Street and Juniper Street** as set forth in the within claim; said sum taken from and charged to Account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

A true copy,

Rhonda Dauphin Johnson
Municipal Clerk, CMC

ADOPTED by the Council
APPROVED by the Mayor

May 3, 2004
May 11, 2004

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 04L0159

Date: April 13, 2003

Claimant /Victim STATE FARM INSURANCE COMPANIES as subrogee of Grant Lamont Winrow

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

Address: 11350 Johns Creek Parkway Duluth, Georgia 30098

Subrogation: X Claim for Property damage \$ 6,190.50 Bodily Injury \$ _____

Date of Notice: 06/06/03 Method: Written, proper X Improper _____

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

Date of Occurrence 12/08/02 Place: Intersection of 10th Street and Juniper Street

Department Police Services Bureau: _____ Division: _____

Employee involved Daniel Genson, Jr. Disciplinary Action: No action taken

NATURE OF CLAIM: The driver of the city vehicle failed to exercise due regard and collided with another vehicle, causing the city vehicle to then strike the claimant's vehicle resulting in damages in the above amount.

INVESTIGATION:

Statements: City employee _____ 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 _____

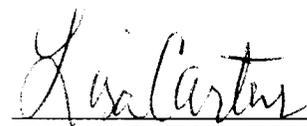
Improper Notice _____ More than Six Months _____ Other _____ Damages reasonable X

City not involved _____ Offer rejected _____ Compromise settlement _____

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

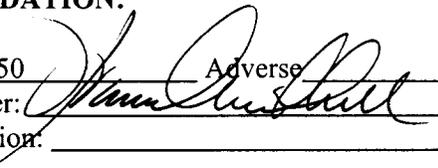
Claimant Negligent _____ City Negligent X Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - LISA CARTER

RECOMMENDATION:

Pay \$ 6,190.50 Adverse _____ Account charged: 1A01 X 2J01 _____ 2P01 _____

Claims Manager:  Concur/date 04/15/04

Committee Action: _____ Council Action _____

State Farm Insurance Companies



Auto Claim Central - Subrogation U
11350 Johns Creek Parkway
Duluth, GA 30098-0001

January 29, 2004

ENTERED - 3-5-04 - SB
04L0159 - LISA CARTER

City of Atlanta

675 Ponce De Leon Avenue
Atlanta, GA 30308

Carter
03/03/04
[Signature]

ATTENTION:

RE: OUR CLAIM NUMBER: 11-4033-726
OUR INSURED: Grant Winrow
DATE OF LOSS: December 8, 2002
TOTAL AMT OF LOSS: \$6,190.50
INSURED'S PAYMENT: \$ 500.00
OUR PAYMENT: \$5,690.50
YOUR INSURED: Daniel Genson
YOUR FILE NUMBER:
POLICY NUMBER:

SUBROGATION CLAIM

We have been informed that you are the liability carrier for the party whose vehicle was involved in a collision with our insured. As a result of the accident we have paid our insured \$5,690.50. In addition, our insured paid \$ 500.00 representing their deductible interest.

In the past, we sent you a subrogation notice with the necessary supporting documents in regards to this matter.

Would you please advise us the status of your investigation and/or your position in this matter.

We will appreciate hearing from you at your earliest opportunity.

Sincerely,

Claim Representative, Team 13

1-866-796-4787 (Outside Metro Atlanta)

State Farm Mutual Automobile Insurance Company

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ATLANTA, GEORGIA**

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