

Entered - 01/31/03 - sb
CL03L0071 - DIANNE C. MITCHELL

CLAIM OF: **DOUGLAS E. SHEAFFER**
3267 Pine Meadow Road
Atlanta, Georgia 30327

04-R-0680

CERTIFIED
MAY 03 2004

*3267 Pine Meadow Road
Atlanta, Georgia 30327*

For damages alleged to have been sustained as a result of property damage due to a collapsed storm sewer in December, 2001 at 3267 Pine Meadow Road.

THIS ADVERSED REPORT IS APPROVED

CERTIFIED
MAY 9 2004
COUNCIL PRESIDENT PROGRAM

BY: 
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 4/27/04

CHAIR: C. F. MA

H. S. S. S.

W. W. W. W.

C. S. S. S.

C. S. S. S.

ADVERSED

MAY 03 2004

✓



CITY OF ATLANTA
OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC
MUNICIPAL CLERK

May 10, 2004

55 TRINITY AVENUE, S.W.
SECOND FLOOR, EAST
SUITE 2700
ATLANTA, GEORGIA 30303
(404) 330-6033
FAX (404) 658-6273

Douglas E. Sheaffer
3267 Pine Meadow Rd
Atlanta, GA 30327

04-R-0680

Dear Mr. Sheaffer:

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 December 01, 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. 03L0071

Date: April 6, 2004

Claimant /Victim DOUGLAS E. SHEAFFER

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

Address: 3267 Pine Meadow Road, Atlanta, Georgia 30327

Subrogation: _____ Claim for Property damage \$ 10,000.00 Bodily Injury \$ _____

Date of Notice: 01/21/03 Method: Written, proper X Improper _____

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

Date of Occurrence 12/01 Place: 3267 Pine Meadow Road

Department Watershed Management Bureau: Storm Water

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: The claimant alleges his property has been damaged due to a collapsed storm sewer that abuts his property. However, the claimant has elected to file a lawsuit to resolve the issues raised in his claim.

INVESTIGATION:

Statements: City employee X 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 _____ 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 _____

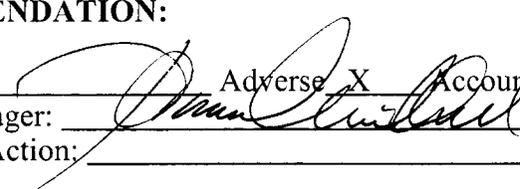
Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

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

Claims Manager:  Concur/date 04/14/04

Committee Action: _____ Council Action _____

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

RECEIVED

JAN 21 2003 PAP

RE: CLAIM FOR DAMAGES

mes
Mitchell
01/31/03

Today's Date: January 14, 2003

Dear Municipal Clerk:

MUNICIPAL CLERK

ENTERED - 1-31-03 - SB
03L0071 - DIANNE MITCHELL

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 10,000 property and/or \$ _____ bodily injury for which I contend the City is liable.

- Date of incident: December 2001 (month/day/year) 2. Time of Incident: P.m 3. Police called: Yes No
- Location of incident (including street address): 3267 Pine Meadow Road, Atlanta GA 30327
- Name of your insurance company: State Farm Policy No. _____
- State what and how incident occurred: A Contractor hired by The City of Atlanta to re-line the sewers (EPI of Henrico GA) came onto our property without permission with a "Bobcat" and did an excavation. They @did not restore the site and @damage an easement. As a result everytime it rains the stormwater runs off into my yard and erodes it. The City's above ground storm water easement is damaged - causing erosion on my property.
- 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 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.

D. E. Sheaffer
Signature of Claimant

Douglas E. Sheaffer

(Print Claimant's Name)

3267 Pine Meadow Road

(Address)

Atlanta, GA 30327

(City, State and Zip Code)

404-877 6677

(Work Number)

404 467 0070

(Home Number)

This problem was reported to several city offices in a timely manner. None advised me of a formal claims process. This damage was reported to Matthew DeJoy, Marco Bentley, Miles McCullif and David Peters.

04-R-0680