

Entered - 11-17-09 sb
CL 09L0876 GWENDOLYN BURNS

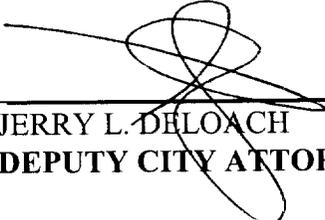
10- R -0198

CLAIM OF: **LIBERTY MUTUAL FIRE
INSURANCE COMPANY
AS SUBROGEE OF
ASHLEY SCHIAVONE**
5050 W. Tilghman Street Polk Street,
Suite 200
Allentown, PA 18104-9154

For property damages alleged to have been sustained from
an automobile accident on July 21, 2009 at Peachtree Street
& 5th Street, NE.

THIS ADVERSED REPORT IS APPROVED

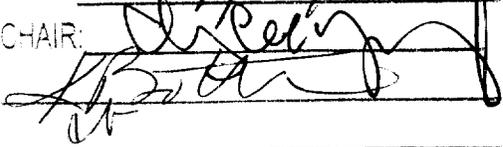
BY: _____

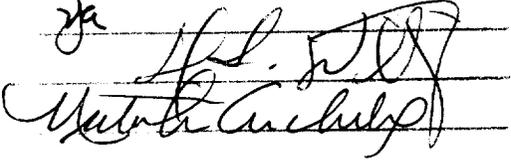

JERRY L. DELOACH
DEPUTY CITY ATTORNEY

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 1/26/10

CHAIR: 



FEB 01 2010

ADVERSED
CITY OF HOUSTON

FEB 01 2010



OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON
MUNICIPAL CLERK

February 9, 2010

55 TRINITY AVENUE, S.W.
SECOND FLOOR, EAST
SUITE 2700
ATLANTA, GEORGIA 30335
(404) 330-6030
FAX (404) 658-6273

Liberty Mutual Fire Insurance
5050 W. Tilghman Street
Suite 200
Allentown, PA 18104-9154

10-R-0198

RE: Subrogee of Ashley Schiavone

Dear Sir/Madam

I sincerely regret that your client has been adversely affected by the circumstances raised in his/her 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 client's claim at its regular meeting on February 1, 2010. 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

Rhonda Dauphin Johnson, CMC
Municipal Clerk

cc: Claims Division/Law Department

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 09L0876

Date: December 29, 2009

Claimant /Victim ASHLEY SCHIAVONE
BY: (Atty) (Ins. Co.) LIBERTY MUTUAL FIRE INSURANCE COMPANY
Address: 5050 W. Tilghman Street, Ste 200, Allentown, PA 18104-9154
Subrogation: X Claim for Property damage \$ Bodily Injury \$ unspecified
Date of Notice: 10/27/09 Method: Written, Proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 7/21/09 Place: Peachtree Street & 5th Street
Department PUBLIC WORKS Bureau: Office: Transportation Services
Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant alleges that she sustained property damages when the vehicle in which she drove collided with another vehicle as it entered the intersection. The claimant contends that the accident was caused by a malfunctioning traffic light as well as her inability to see a second traffic light that was obstructed by tree limbs. However, an investigation has determined that the accident occurred as a result of the claimant's failure to obey the Uniform Rules of the Road, pursuant to O.C.G.A §40-6-20, Obedience to traffic-control devices required. Secondly, the City was not on notice of the traffic light obstruction prior to the date of the claimant's accident.

INVESTIGATION:

Statements: City employee Claimant Others Written Oral
Pictures X Diagrams Reports: Police Dept Report X Other X
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,

[Signature]
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ Adverse X Account charged: General Fund Water & Sewer Aviation
Claims Manager: [Signature] Concur/date 1/12/10
Committee Action: Council Action



Liberty Mutual Fire Insurance Company

5050 W Tilghman St Ste 200
Allentown PA 18104-9154
Tel: (800) 521-0986 / (800) 521-0986
Fax: (603) 334-0372

October 15, 2009

ENTERED - 11-17-09 - SB
09L0876 - G. BURNS

EL 10/21
BURNS
11/13/09
2009 OCT 27 AM 10:51
RECEIVED
OFFICE OF
MUNICIPAL CLERK

CITY OF ATLANTA
MUNICIPAL CLERK, 55 TRINITY AVE SW
ATLANTA GA 30303

ATTN MUNICIPAL CLERK

YOUR INSURED: VEDIA JACKSON
YOUR CLAIM NUMBER:
DATE OF LOSS: 07/21/2009
LOSS LOCATION: PEACHTREE ST & 5TH ST
ATLANTA, GA

OUR CLAIM NUMBER: PD586-011744071-01
OUR INSURED: ASHLEY SCHIAVONE
ADDRESS: 74 WILD THISTLE LN
SAVANNAH GA 31406-7213

OUT OF POCKET: \$265.52 for rental
(if known)

Dear Claims Department:

Based on our investigation of this accident, we believe your Insured to be responsible for the damage to our Insured's vehicle. I have enclosed documentation to support the following subrogation claim:

Amount we have paid	\$	53693.25
Our Insured's deductible	\$	1000.00
Total amount of damages	\$	31258.55
Salvage (if applicable)	\$	11397.00
Rental (if applicable)	\$	840.00
Total Subrogation Amount Due	\$	32098.55

Please include our claim number on your check for the total amount of damages shown above. Please deal directly with our insured to discuss any out of pocket expenses they may have incurred. Payment for out of pocket expenses should be made directly to our insured.

(over)

Please call me if you have any questions. If you prefer to communicate by email, my address is listed below. When communicating by email, please be sure to include the claim number in the subject line.

Sincerely,
MARLA KISTLER-NOMURA
Recovery Team
Subrogation Department
(800) 521-0986 / (800) 521-0986
Extension 73357
Email: MARLA.KISTLER-NOMURA@LIBERTYMUTUAL.COM

10- R -0198

RCS# 42
2/01/10
2:07 PM

Atlanta City Council

REGULAR SESSION

CONSENT I

ADOPT

YEAS: 13
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 2
EXCUSED: 0
ABSENT 1

B Smith	Y Archibong	Y Moore	Y Bond
NV Hall	Y Wan	Y Martin	Y Watson
Y Young	Y Shook	Y Bottoms	Y Willis
Y Winslow	Y Adrean	Y Sheperd	NV Mitchell

CONSENT I

		02-01-10
ITEMS ADOPTED ON CONSENT	ITEMS ADVERSED ON CONSENT	ITEMS ADVERSED ON CONSENT
1. 10-O-0118	36. 10-R-0182	
2. 10-O-0119	37. 10-R-0183	
3. 10-O-0120	38. 10-R-0184	
4. 10-O-0121	39. 10-R-0185	
5. 10-O-0122	40. 10-R-0186	
6. 10-O-0123	41. 10-R-0187	
7. 10-O-0126	42. 10-R-0188	
8. 10-O-0127	43. 10-R-0189	
9. 10-O-0128	44. 10-R-0190	
10. 10-O-0129	45. 10-R-0191	
11. 10-O-0220	46. 10-R-0192	
12. 10-O-0221	47. 10-R-0193	
13. 10-O-0057	48. 10-R-0194	
14. 10-O-0135	49. 10-R-0195	
15. 10-R-0134	50. 10-R-0196	
16. 10-R-0162	51. 10-R-0197	
17. 10-R-0227	52. 10-R-0198	
19. 10-R-0164	53. 10-R-0199	
20. 10-R-0165	54. 10-R-0200	
21. 10-R-0166	55. 10-R-0201	
22. 10-R-0169	56. 10-R-0202	
23. 10-R-0170	57. 10-R-0203	
24. 10-R-0171	58. 10-R-0204	
25. 10-R-0222	59. 10-R-0205	
26. 10-R-0228		
27. 10-R-0173		
28. 10-R-0174		
29. 10-R-0175		
30. 10-R-0176		
31. 10-R-0177		
32. 10-R-0178		
33. 10-R-0179		
34. 10-R-0180		
35. 10-R-0181		