

Entered 12/28/09 sb  
CL 09L1036 - LISA CARTER

10- R -0363

**CLAIM OF: LENORE G. CONROY**  
247 Brighton Road, NE  
Atlanta, Georgia 30309

For damages alleged to have been sustained as a  
result of an automobile accident on December 1, 2009  
at 1200 Howell Mill Road.

THIS ADVERSED REPORT IS  
APPROVED

BY: \_\_\_\_\_

**JERRY L. DELOACH**  
**DEPUTY CITY ATTORNEY**



### ADVERSE REPORT

PUBLIC SAFETY &  
LEGAL ADMINISTRATION COMMITTEE

DATE: 2/23/10

CHAIR: [Signature]

[Signature]

[Signature]

[Signature]

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MAR 01 2010

RECEIVED  
MAR 01 2010

ADVERSED BY  
CITY ATTORNEY

MAR 01 2010



OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON  
MUNICIPAL CLERK

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

March 9, 2010

Ms. Lenore G. Conroy  
247 Brighton Road, NE.  
Atlanta, Georgia 30309

**10-R-0363**

Dear Ms. Conroy

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 March 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.**

Sincerely,

  
Rhonda Dauphin Johnson, CMC  
Municipal Clerk

**cc: Claims Division/Law Department**

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 09L1036

Date: January 26, 2010

Claimant /Victim LENORE G. CONROY

BY:(Atty)(Ins.Co.) \_\_\_\_\_

Address: 247 Brighton Road, NE Atlanta, Georgia 30309

Subrogation: \_\_\_\_\_ Claim for Property damage \$ \$1,000.00 Bodily Injury \$ \_\_\_\_\_

Date of Notice: 12/21/09 Method: Written, proper X Improper \_\_\_\_\_

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

Date of Occurrence 12/01/09 Place: 1200 Howell Mill Road

Department Police Services Bureau: \_\_\_\_\_ Office: \_\_\_\_\_

Employee involved Brigette Porter Disciplinary Action: Pending

NATURE OF CLAIM: The driver of a city vehicle while attempting to park in a parking space struck the claimant's vehicle causing damages in the above amount. The claimant has elected to file a claim with her insurance company for the damages to her vehicle.

INVESTIGATION:

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others \_\_\_\_\_ Written \_\_\_\_\_ Oral \_\_\_\_\_

Pictures X Diagrams \_\_\_\_\_ Reports: Police X 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 - LISA CARTER

RECOMMENDATION:

Pay \$ \_\_\_\_\_ Adverse X Account charged: General Fund \_\_\_\_\_ Water & Sewer \_\_\_\_\_ Aviation \_\_\_\_\_

Claims Manager: \_\_\_\_\_ Concur/date 02/09/10

Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK  
City Hall  
55 Trinity Avenue, SW  
Atlanta, Georgia 30303

RECEIVED  
OFFICE OF  
MUNICIPAL CLERK

RE: CLAIM FOR DAMAGES

2009 DEC 21 AM 11:01

Today's Date: 12-9-09

ENTERED - 12-28-09 - SB  
09L1036 - L. CARTER

CANTON  
12/24/09  
[Signature]

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount of \$ 1000 + property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 12/1/09 2. Time of incident: 11:45<sup>am</sup> 3. Police called: \_\_\_\_\_
4. Location of incident (including street address): Star Provision @ Howell Mill Rd.
5. Name of your insurance company: State Farm Policy No. 415 7961-D15-11
6. State what and how incident occurred: Driver I was pulling into a parking space + misjudged the space + hit the vehicle parked beside her.

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.

Your vehicle: 2008 Mercedes BWK5351 Lenore A. Conroy  
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: 96 Ford Brigitte Porter  
(Make) (City/Driver's Name) (Department/Bureau)

9. Witness: AC Booker-Higgins - Passengers

10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State Inv, 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 from the date of the event.

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

[Signature]  
Signature of Claimant

Lenore A. Conroy  
(Print Claimant's Name)

297 Brighton Rd NE  
(Address)

Atlanta, GA 30309  
(City, State and Zip Code)

404-228-7039  
(Work Number) (Home Number)

lenore\_conroy@yahoo.com

10- R -0363

		03-01-10
ITEMS ADOPTED ON CONSENT	ITEMS ADOPTED ON CONSENT	ITEMS ADVERSE ON CONSENT
1. 10-O-0275	36. 10-R-0350	42. 10-R-0356
2. 10-O-0276	37. 10-R-0351	43. 10-R-0357
3. 10-O-0277	38. 10-R-0352	44. 10-R-0358
4. 10-O-0278	39. 10-R-0353	45. 10-R-0359
5. 10-O-0279	40. 10-R-0354	46. 10-R-0360
6. 10-O-0289	41. 10-R-0355	47. 10-R-0361
7. 10-O-0290		48. 10-R-0362
8. 10-O-0291		49. 10-R-0363
9. 10-O-0292		50. 10-R-0364
10. 10-O-0293		51. 10-R-0365
11. 10-O-0294		52. 10-R-0366
12. 10-O-0296		53. 10-R-0367
13. 10-O-0241		54. 10-R-0368
14. 10-O-0307		55. 10-R-0369
15. 10-R-0334		56. 10-R-0370
16. 10-R-0335		57. 10-R-0371
17. 10-R-0390		58. 10-R-0372
19. 10-R-0395		59. 10-R-0373
20. 10-R-0407		60. 10-R-0374
21. 10-R-0411		61. 10-R-0375
22. 10-R-0394		62. 10-R-0376
23. 10-R-0396		63. 10-R-0377
24. 10-R-0338		64. 10-R-0378
25. 10-R-0339		65. 10-R-0379
26. 10-R-0340		66. 10-R-0380
27. 10-R-0341		67. 10-R-0381
28. 10-R-0342		68. 10-R-0382
29. 10-R-0343		69. 10-R-0383
30. 10-R-0344		70. 10-R-0384
31. 10-R-0345		71. 10-R-0385
32. 10-R-0346		
33. 10-R-0347		
34. 10-R-0348		
35. 10-R-0349		