

Entered - 1-26-10 sb
CL 10L0046- GWENDOLYN BURNS

10- R -0380

CLAIM OF: WENDY M. BELL
2103 Vineyard Walk, SE, Apt. 5
Atlanta, Georgia 30316

For bodily injuries alleged to have been sustained from fall on
an escalator on December 12, 2009 at Hartsfield-Jackson
Atlanta International Airport, 8700 Spine Road.

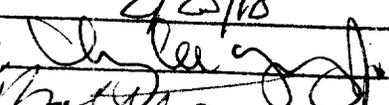
THIS ADVERSED REPORT IS APPROVED

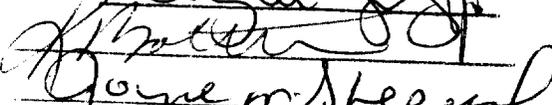
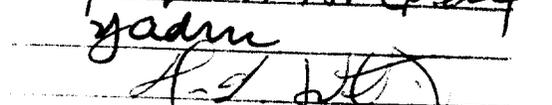
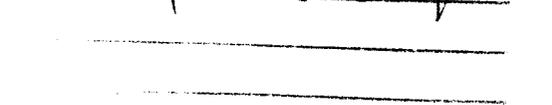
BY: 
JERRY L. DELOACH
DEPUTY CITY ATTORNEY

ADVERSE REPORT

PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE

DATE: 2/23/10

CHAIR: 

MAR 01 2010

MAR 01 2010

ADVERSED BY
CITY COUNCIL

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 10, 2010

Ms Wendy Bell
2103 Vineyard Walk, SE Apt. 5
Atlanta georgia 30316

10-R-0380

Dear Ms. Bell

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. 10L0046

Date: January 29, 2010

Claimant /Victim WENDY M. BELL
BY: (Atty) (Ins. Co.)
Address: 2103 Vineyard Walk, SE, Apt. 5, Atlanta, Georgia 30316
Subrogation: Claim for Property damage \$ Bodily Injury \$ undetermined
Date of Notice: 1/25/10 Method: Written, Proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 12/12/09 Place: 8700 Spine Road, Hartsfield-Jackson Atlanta International Airport
Department AVIATION Bureau: Office:
Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant alleges that a passenger fell on the escalator causing her to fall as well as other passengers behind her at the above location. However, the claim has been forwarded to the City's insurance carrier for resolution.

INVESTIGATION:

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

BASIS OF RECOMMENDATION:

Function: Governmental Ministerial X
Improper Notice More than Six Months Other X Damages reasonable
City not involved Offer rejected Compromise settlement
Repair/replacement by Ins. Co. X 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 02/10/10
Committee Action: Council Action

RECEIVED

P.M.

JAN 19 2010

10- R -0380

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

RE: CLAIM FOR DAMAGES
CITY OF ATLANTA
DEPT OF LAW
Today's Date: 1/19/10

ENTERED - 1-26-10 - SB
10L0046 - G. BURNS

BULLS
1/25/10

Dear Municipal Clerk:

his part
can't really
answer

attach
medical bills
2. as suffering???

compensation
for me

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

1. Date of incident: 12/12/2009 2. Time of incident: 6:30am 3. Police called: airport personnel

4. Location of incident (including street address): inside airport/concourse T escalators

5. Name of your insurance company: _____ Policy No. _____

6. State what and how incident occurred: On my way to work, went through security, was on escalators, lady passenger in front of me pulling on her luggage, she falls, I felled on her, people from behind me started falling on me.

Please see
attach
letter

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: _____
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: _____
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____

10. The acknowledgement 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 from the date of the event.

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

Signature of Claimant
Wendy M. Bell

Wendy M. Bell
(Print Claimant's Name)

2103 D. neyard Walk S.E. Apt. 5
(Address)

Atlanta, Ga. 30316
(City, State and Zip Code)

(Work Number) (Home Number)

404-305
8888

678-913-
5039

Request
Interview!!!
if possible
please

		03-01-10
ITEMS ADOPTED ON CONSENT	ITEMS ADOPTED ON CONSENT	ITEMS ADVERSED 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		