

OFFICE OF THE
COUNTY COUNSEL



COUNTY OF SANTA CRUZ

GOVERNMENT CENTER
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GOVERNMENT TORT CLAIM
RECOMMENDED ACTION

DEBORAH STEEN
SAMUEL TORRES, JR.
CHIEF ASSISTANTS

ASSISTANTS

Agenda June 23, 1998

To: The Board of Supervisors

Re: **Clam** of Carol and L. Basnight, No. 798-143

Original Document and associated materials are on file at the Cleric to the Board of Supervisors.

In regard to the above-referenced claim, this is to recommend that the Board take the following action:

- 1. Deny the claim of Carol and L. Basnight, No. 798-143 and refer to County Counsel.
- 2. Deny the application to file a late claim on behalf of _____ and refer to County Counsel.
- 3. Grant the application to file a late claim on behalf of _____ and refer to County Counsel.
- 4. Approve the claim of _____ in the amount of _____ and reject it as to the balance, if any, and refer to County Counsel.
- 5. Reject the claim of _____ as insufficiently filed and refer to County Counsel.

RISK MANAGEMENT

By Joret McKinley

COUNTY COUNSEL

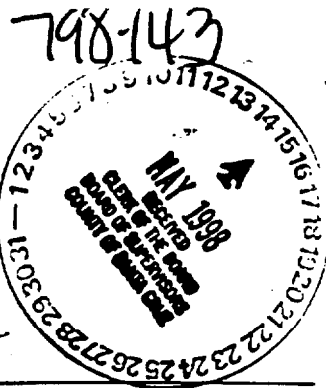
By [Signature]

cc: Mark Tracy, Sheriff-Coroner

LTR9.WPT

PER 5107 Rev 4, 97

CLAIM AGAINST THE COUNTY OF SANTA CRUZ
(Pursuant to Section 9 10 et Seq., Govt. Code)



TO: BOARD OF SUPERVISORS
COUNTY OF SANTA CRUZ
ATTN: Clerk of the Board
Governmental Center
701 Ocean Street, Santa Cruz, CA 95060

1. Claimant's Name: CAROL AND L. BASMANT
Address: 1380 AIR TERRACE
BEN LOMOND CA 95005
Phone No: 408 336 5484

P.O. Box to which notices are to be sent: _____

Occurrence: NOV. 16, 1997 AND ~~NOV~~ DEC. 20, 1997
Date: 1 Place: 1380 AIR TERRACE

Circumstances of occurrence or transaction giving rise to claim: SHERIFF BROKE
LARGE HUBBS OFF DOOR AND TORE UP
1/4 of insulation under house AND BROKE
9 tiled down front gate & kicked in front door

4. General description of indebtedness, obligation, injury, damage or loss incurred so far as is now known: had to buy materials for new door & gate,
get dogs out of animal shelter & still need
other items fixed. Not counting labor

5. Name(s) of public employec(s) causing injury, damage or loss, if known: SHERIFF

6. Amount claimed now \$ 8281
Estimated amount of future loss, if known \$ 250.00
TOTAL \$ 33281

7. Basis for above computations: this does not count labor

8. If the amount claimed is over \$ 10,000, indicate the court of jurisdiction:
_____ Municipal Court _____ Superior Court

CLAIMANT'S SIGNATURE: Carol G. Basment 5/15/98

Note: Claim must be presented to Clerk, Board of Supervisors, within six (6) months after the act which occasioned the injury.

Americans with Disabilities Act questions or requests for accommodations may be directed to the ADA Coordinator at 454-2962 (TDD 454-2 123).