

OFFICE OF THE
COUNTY COUNSEL



COUNTY OF SANTA CRUZ

GOVERNMENT CENTER
(408)454-2040
FAX(408)454-2115

701 OCEAN STREET, ROOM 505, SANTA CRUZ, CALIFORNIA 95060-4068

DWIGHT L. HERR
COUNN COUNSEL.

DEBORAH STEEN
SAMUEL TORRES, JR.
CHIEF ASSISTANTS

HARRY A. OBERHELMAN III

MARIE COSTA
JANE M. SCOTT
RAHN GARCIA
TAMYRA CODE
PAMELA FYFE
ELLEN LEWIS
KIM BASKETT
LEE GULLIVER
DANA McRAE

ASSISTANTS

GOVERNMENT TORT CLAIM RECOMMENDED ACTION

Agenda August 18, 1998

To: The Board of Supervisors

Re: Claim of John Kunkle, No. 899-013A, Amended

Original Document and associated materials are on file at the Clerk 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 John Kunkle, No. 899-013A, Amended 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.

cc: John Fantham, Director
Department of Public Works

RISK MANAGEMENT

By Janet McKinley

COUNN COUNSEL

By Elaine Lewis

LTR9.WPT

899-013A
CL. 1. **IN THE COUNTY OF SANTA CRUZ**
(Pursuant to Section 910 et Seq., Govt. Code)

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



1. Claimant's Name: JOHN KUNKLE
Address: C/O LAW OFFICES OF STEPHEN COLE & ASSOC.
3050 Leacon Blvd., Ste 104, West Sacramento, CA 95691
Phone No: (916) 371-5041
P.O. Box to which notices are to be sent: _____
2. Occurrence: EUCALYPTUS TREES FALLEN ON HOUSE
Date: 2-6-98 Place: 3211 FAIRWAY DRIVE, SOQUEL, CALIFORNIA
Circumstances of occurrence or transaction giving rise to claim: COUNTY TREE - OVERGROWN AND IMPROPERLY MAINTAINED - FELL ONTO HOUSE; ENDANGERING OCCUPANTS AND DESTROYING PERSONAL PROPERTY, AS WELL AS FORCED EVICTION DUE TO UNSAFE HABITATION.
4. General description of indebtedness, obligation, injury, damage or loss incurred so far as is now known:
LOSS OF PERSONAL PROPERTY, TEMPORARY HOUSING & MOVING COSTS,
INCREASED RENTAL EXPENSES AND RENTAL DEPOSIT
5. Name(s) of public employee(s) causing injury, damage or loss, if known: RINS ALBRECHT THE ENCROACHMENT AND DRIVEWAY' DIVISION OF THE SANTA CRUZ CO. PUBLIC WORKS
6. Amount claimed now \$ 23,889.00
Estimated amount of future loss, if known \$ 100,000
TOTALS 128,889.00
7. Basis for above computations: REPAIRS HAVE YET TO BE COMPLETED AND/OR EVALUATED
8. If the amount claimed is over \$10,000, indicate the court of jurisdiction:
_____ Municipal Court XXXX _____ Superior Court

CLAIMANT'S SIGNATURE: _____

STEPHEN N. COLE'

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 454-2123).