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County of Santa Cruz

OFFICE OF THE COUNTY COUNSEL

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Assistants

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CHIEF ASSISTANTS RAHN GARCIA DANA McRAE

GOVERNMENT TORT CLAIM

RECOMMENDED ACTION

		Agenda April 24, 2001
То:	Board	of Supervisors
Re:	Claim	ofGuy Grable, No. 001-055C
Origii	nal docur	ment and associated materials are on file at the Clerk to the Board of Supervisors.
In reg	ard to th	e above-referenced claim, this is to recommend that the Board take the following action:
X	_1.	Reject the claim of Guy Grable, No. 001-055C 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
	_5.	and reject the balance, if any, and refer to County Counsel. Reject the claim of as insufficiently filed and refer to County Counsel.
cc:	Barry	Samuel, Director, POSCS RISK MANAGEMENT BY

PER5107 wp Rev 9/2000

001-0556

CLAIM AGAINST THE COUNTY OF SANTA CRUZ (Pursuant to Section 910 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: Guy Grable
	Address: C/o Paul P. Burdick. C s a 121 Jewell Street Santa Comp. CA 05060
	Phone No: (831) 426 7040
	P.O. Box to which notices are to be sent:
2.	Occurrence: Auto v. Auto accident Head-on collision
	Date: 10-10-2000 Place: Graham Hill Road 5 feet south of Summit Road
3.	Circumstances of occurrence or transaction giving rise to claim: Gity Grable has a bodil vinjury claim arising from the auto v. auto accident caused by the
	negligence of Santa Cruz County employee Christian Beamish. Highway
	Patrol investisation confirms that the negligence of Mr. Beamish caused
4.	the accident. Attached is a copy of the Hiehway Patrol Report. General description of indebtedness, obligation, injury, damage or loss incurred so far as is now known: Mr. Gable suffered disc herniation at C-3-C4, C5-C6, and CG-C7. He
	is totally disabled from his employment as a landscape maintenance
	worker for Mt. Hermon Assoc. He is under the care of a neurosurgeon.
5.	The neurosurgeon has recommended surgery. Name(s) of mubic employee(s, causing injury, damage or loss, if known:
	Christaï - Beamish
6.	Amount claimed now
	Estimated amount of future loss, if known Unknown at present \$ Unknown
_	TOTALS 200,000 and future loss
7.	Basis for above computations: Claimant has incurred past medical expenses in the excess of
8.	\$10,000; loss of earnings in excess of \$7,500. It is anticipated (Over) If the amount claimed is over \$10,000, indicate the court of jurisdiction:
	Municipal Court Santa Cruz County Superior Court
	CLAIMANT'S SIGNATURE: Pare P. Barrier attorney & claiment.
	Paul P. Burdick, ESq. Attorney for Claimant
Note <u>:</u>	Claim must be presented to Clerk, Board of Supervisors, within six (6) months after the act which occasioned the injury.

ericans with Disabilities Act questions or requests for accommodations may be directed to the ADA Coordinator

Aftericans with Disabilities Acat 454-2962 (TDD 454-2123).

7 (cont.) he will require surgery at an expense exceeding \$50.000. He will have permanent disability and pain.

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