



County of Santa Cruz

OFFICE OF THE COUNTY COUNSEL

701 OCEAN STREET, SUITE 505, SANTA CRUZ, CA 950604068
(831)454-2040 FAX: (831)454-2115

DANA McRAE, COUNTY COUNSEL

CHIEF ASSISTANT
RAHN GARCIA

Deborah Steen
Harry A. Oberhelman III
Marie Costa
Jane M. Scott
Tamyra Rice

Assistants

Pamela Fyfe
Kim Elizabeth Baskett
Julia Hill
Dwight L. Herr
Shannon Sullivan

Sharon Carey- Stronck
Margaret M. Burks
David Kendig
Miriam L. Stompler
Ligi Coleen Yee

GOVERNMENT TORT CLAIM

RECOMMENDED ACTION

Agenda March 12, 2002

To: Board of Supervisors

Re: Claim of Susan & Michael Smith, No. 102-096

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. Reject the claim of Susan & Michael Smith, No. 102-096 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 the balance, if any, and refer to County Counsel.
- 5. Reject the claim of _____ as insufficiently filed and refer to County Counsel.

cc: Not County Jurisdiction

RISK MANAGEMENT

By Janet McKinley
Janet McKinley, Risk Manager

DANA McRAE, COUNTY COUNSEL

By Kim Elizabeth Baskett
Kim Elizabeth Baskett, Assistant County Counsel

107096

SMITH



Original Photos with Clerk of the Board

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: SUSAN & MICHAEL SMITH Address: 102 BROOKWOOD DRIVE SANTA CRUZ, CALI., 95065 Phone No: (831) 429-6869

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

2. Occurrence: FLAT TIRE DUE TO HOLE IN ROAD, BROOKWOOD DRIVE Date: Place: HWY ROAD, BROOKWOOD DRIVE

3. Circumstances of occurrence or transaction giving rise to claim: (1-03-02) I WAS DRIVING MY CAR (2002 VW BUG) AT APPROX. 7:30PM THAT NIGHT. ON A VERY DARK stretch of road on Brookwood Drive. Heading south toward Paul Sweet Rd. when I hit a hole in the road. It rattled the car, making a loud sound, when I stopped the car a minute later I heard a hissing

4. General description of indebtedness, obligation, injury, damage or loss incurred so far as is now known: sound coming from the right front tire, on inspection of the tire I could see a tear in the side casing of the tire. This tear or hole in the tire was a direct result of hitting the hole in the road (over)

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

6. Amount claimed now: \$ 108.68 Estimated amount of future loss, if known: \$ TOTAL \$ 108.68

7. Basis for above computations: I got 4 estimates for the tire and balancing the tire. I took the lowest estimate.

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

CLAIMANT'S SIGNATURE: Susan Smith Michael E. Smith

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

15 Americans with Disabilities Act questions or requests for accommodations may be directed to the ADA Coordinator at 454-2962 (TDD 454-2123).