RECOMMENDED ACTION AND JUSTIFICATION:  (Policy Item: Yes ___ No ___ x)
Pass and adopt this Resolution approving Claim No. C92-20 in the amount of $36.55 for reimbursement of the cost of repairs to an automobile that was damaged after driving over road work performed by the County on claimant's driveway encroachment. Further authorize Auditor to draw warrant, upon approval by the Board, in the amount of $36.55 made payable to Craig Kennedy. Warrant should be forwarded to County Counsel's office for processing to claimant. Based upon discussions with personnel of the Public Works Department, it appears that this is a reasonable claim and the County does have some liability in this matter.

BACKGROUND AND HISTORY OF BOARD ACTIONS:
The Board usually follows Counsel's recommendation in matters of this nature.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:
Claimant would not be reimbursed for cost of repairs to his vehicle.
Claim would automatically be denied if no action is taken.

COST: ( ) Not Applicable
A. Budgeted current FY $_______
B. Total anticipated costs $_______
C. Required add'l funding $_______
D. Internal Transfers $_______

SOURCE: ( ) 4/5ths Vote Required
A. Unanticipated revenues $_______
B. Reserve for contingencies $_______
C. Source Description:_____________________

Balance in Reserve for Contingencies, if approved: $_______

SPECIAL INSTRUCTIONS:
List the attachments and number the pages consecutively:
Claim No. C92-20 w/attached

CLERK'S USE ONLY:
Res. No.: 92-325 Ord. No.: ______
Vote: Ayes:____ Noes:____
Absent:____ Abstained:____
Approved ( ) Denied
( ) Minute Order Attached
( ) No Action Necessary

The foregoing instrument is a correct copy of the original on file in this office.

DATE: ____________________________
ATTEST:  MARGIE WILLIAMS
Clerk of the Board of Supervisors
County of Mariposa, State of Calif.
By: ____________________________
Deputy

For Auditor's Use Only: Account #014-100-2-501

ADMINISTRATIVE OFFICER'S RECOMMENDATION:
This item on agenda as:
☐ Recommended
☐ Not Recommended
☐ For Policy Determination
☐ Submitted with Comment
☐ Returned for Further Action

Comment: ____________________________
A.O. Initials: ____________________________
Claim of [Craig E. Kennedy] (Claimant)  

v.  

COUNTY OF MARIPosa  

CLAIM FOR PERSONAL INJURIES AND/OR PROPERTY DAMAGES  (SECTION 910 OF THE GOVERNMENT CODE)  

To the BOARD OF SUPERVISORS OF MARIPosa COUNTY:  

You are hereby notified that:  (Please print)  

Claimant: [Craig E. Kennedy]  

Whose address is: [7030 Hites Cove Rd]  

City and State: [Mariposa, CA]  

Zip: [95338]  

claims damages from the COUNTY OF MARIPOSA in the amount, computed as of the date of presentation of this claim, of $ [36,500]  

This claim is based on (check appropriate box or boxes)  

[ ] Property Damage  
[ ] Personal Injury  
[ ] Contract  

which occurred on [July - Aug.] 1992 in the vicinity of: [7030 Hites Cove Rd, Mariposa, Pine Creek Driveway]  

Describe generally the facts and circumstances that give rise to the claim: (Please use back of this page if more space is needed.)  

[The public work crew cut a ditch to deep to allow my wife's car to exit our driveway - this has since been corrected -]  

The name(s) of the public employee(s) causing claimant's injuries or damages under the above described circumstances (is) (are): [Public Work Crew]
The injuries sustained by claimant, as far as known, as of the
date of presentation of this claim consist of: (describe generally
claimant's injuries or damages:) 

**MUSCLE HURT PAVEMENT**

*every time auto went across driveway*

**DITCH**

The amount claimed, as of the date of presentation of this
claim is computed as follows:

**Damages incurred to date**

- Expenses for medical and hospital care: $_______
- Loss of earnings: $_______
- Specific damages (itemize):
  - MUSCLE from loose
  - FORM HANGERS: $26.55
  - Other damages (itemize): $_______

Total damages incurred to date: $36.55

**Estimated future damages as far as known**

from this incident:

Total estimated prospective damages: $_______

**TOTAL AMOUNT CLAIMED AS OF DATE OF**
**PRESENTATION OF THIS CLAIM:**

$_______

All notices or other communications with regard to this claim
should be sent to claimant at: 7030 HITE CRES RD
MARIPOSA CA 95338

(address to which notices are to be sent)

Dated: 10-1-94
Signed: Craig E. Vander Noot

(claimant/agent for claimant)

GOVERNMENT CODE §911.2. Time of or presentation of claims

A claim relating to a cause of action for death or for injury
to person or to personal property or growing crops shall be presented
as provided in Article 2 (commencing with Section 915) of this chapter
not later than the 100th day after the accrual of the cause of action.
a claim relating to any other cause of action shall be presented as
provided in Article 2 (commencing with Section 915) of this chapter
not later than one year after the accrual of the cause of action.
At this location since "1957"

Cal-State Muffler & Brake
1160 N. Blackstone • Fresno, CA 93701
268-9866

Sold To: Wang Kennedy
Address: 37030 Nitro Ct., City: Clovis, Zip: 93619, Phone: 743-7778

Date: 8/3/92

Estimate

Date 8/3/92

All parts installed are new parts unless specified otherwise.

Preliminary Estimate of Repairs $36.55

Revised Estimate $36.55

Time: 10:30 AM

Person Authorizing Revised Estimate: Wang Kennedy

All parts removed will be discarded unless otherwise specified.

I authorize necessary sublet repairs, I acknowledge mechanics lien, if necessary, to secure the amount of repairs.

Customer Signature: Wang Kennedy

Customer acknowledges receipt of copy hereof.

Bank of America

ASHIR:

I hereby authorize the above repair work to be done along with necessary materials. You and your employees may operate above vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, accident or any other cause beyond your control.

Additional terms and conditions on reverse side — please read reverse side.

Authorized by:

Received by:

1% per month (18% Annual Rate) will be charged on all accounts over 30 days.