RECOMMENDED ACTION AND JUSTIFICATION:

Authorize Chair to sign an Order of the Board to reject Claim No. C04-14 in the amount of $389.00. Claimant alleges that a chunk of asphalt on a county road dislodged puncturing his tire and damaging a wheel on his vehicle. The County Administrative Officer/Risk Manager recommends rejection of this claim based on the County Administrative Officer/Risk Manager’s belief that the County has no responsibility in this matter.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board usually follows the Risk Manager’s recommendation in matters of this nature.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

- Reject claim as recommended.
- Take no action; claim will automatically be denied if no action is taken.

Financial Impact? \( \square \) Yes \( \times \) No  Current FY Cost: $  Annual Recurring Cost: $
Budgeted In Current FY? \( \square \) Yes \( \times \) No \( \square \) Partially Funded
Amount in Budget: $  List Attachments, number pages consecutively
Additional Funding Needed: $  Claim
Source:
Internal Transfer
Unanticipated Revenue  \( \times \) 4/5’s vote
Transfer Between Funds  \( \square \) 4/5’s vote
Contingency  \( \times \) 4/5’s vote
\( \square \) General \( \sq  \) Other

CLERK’S USE ONLY:
Vote – Ayes: 5  Noes: 
Absent: 
\( \times \) Approved
\( \times \) Minute Order Attached \( \square \) 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
County of Mariposa, State of California
By: 
Deputy

COUNTY ADMINISTRATIVE OFFICER:
\( \checkmark \) Requested Action Recommended
\( \square \) No Opinion
Comments:

CAO: 

Revised Dec. 2002
MARIPOSA COUNTY BOARD OF SUPERVISORS

MINUTE ORDER

TO: RICH INMAN, County Administrative Officer
FROM: MARGIE WILLIAMS, Clerk of the Board
SUBJECT: ORDER OF THE BOARD TO REJECT CLAIM NO. C04-14
Resolution No. 04-512

THE BOARD OF SUPERVISORS OF MARIPOSA COUNTY, CALIFORNIA,

ADOPTED THIS Order on December 7, 2004

ACTION AND VOTE:

Approval of Consent Agenda (See End of Minutes)

BOARD ACTION: Chairman Parker advised of a correction to item 4 to reflect the Statement of Votes Cast as certified to the Secretary of the State on November 24, 2004. Supervisor Balmain pulled item 10. Supervisor Bibby pulled items 10, 1 and 11. Supervisor Stetson pulled item 9. (M)Pickard, (S)Bibby, the balance of the items was approved/Ayes: Unanimous.

Consent Agenda item 1 – Supervisor Bibby initiated discussion and asked for clarification on whether the claim is for two tires. She requested that when claims are received that someone from the County inspect the road to determine whether there is a problem, and the County Administrative Officer stated he would review this. (M)Stetson, (S)Pickard, item 1 was approved/Ayes: Unanimous.

Consent Agenda item 9 – Supervisor Stetson initiated discussion. Dana Hertfelder, Public Works Director, provided input relative to the request. (M)Stetson, (S)Pickard, item 9 was approved/Ayes: Unanimous.

Consent Agenda item 10 – Supervisor Balmain initiated discussion. Dana Hertfelder provided input relative to the request. Supervisor Balmain asked that the contract language be clarified relative to the costs and application for the first and second application of the per lane mile, and the Board concurred. (M)Balmain, (S)Pickard, item 10 was approved/Ayes: Unanimous.

Consent Agenda item 11 – Supervisor Bibby asked whether language needed to be included to show the end of the “no parking” area. Dana Hertfelder advised that signage will be placed to show the end of the “no parking” area. (M)Bibby, (S)Stetson, the second reading was waived and Ordinance No. 1013 was adopted. The Clerk of the Board read the Ordinance number and title of the Ordinance into the record. Ayes: Unanimous.

CA-1 Authorize the Chairman of the Board of Supervisors to Sign an Order of the Board to Reject Claim No. C04-14 in the Amount of $389.00 (County Administrative Officer); Res. 04-512, with direction to the County Administrative Officer

cc: File
BEFORE THE BOARD OF SUPERVISORS
OF
MARIPOSA COUNTY, STATE OF CALIFORNIA

In the Matter of: CLAIM NO. 04-14
CLAIM FOR DAMAGES PURSUANT
TO GOVERNMENT CODE § 911.6

DALLAS GORE, 3966 Ben Hur Road, Mariposa, California, having filed with this Board on November 10, 2004, a claim for damages in an amount of $389.00.

NOW, THEREFORE, IT IS ORDERED by the Board of Supervisors that the claim is hereby rejected.

The foregoing order was passed by the following vote of the Board:

AYES: NOES: ABSENT: ABSTAINED:

Dated this 7th day of December, 2004.

GARRY R. PARKER, Chair
Board of Supervisors

MARGIE WILLIAMS, Clerk of the Board

APPROVED AS TO FORM AND LEGAL SUFFICIENCY:

THOMAS P. GUARINO, County Counsel
TO: Dallas Gore  
3966 Ben Hur Road  
Mariposa, CA 95338

RE: CLAIM FOR DAMAGES (DALLAS GORE- CLAIM NO. C04-14)  
AMOUNT OF CLAIM: $389.00  
NOTICE OF REJECTION

NOTICE IS HEREBY GIVEN that the claim, which you presented to the Board of  
Supervisors of Mariposa County on November 10, 2004, was rejected by action of the  
Board on December 7, 2004.

WARNING

"Subject to certain exceptions, you have only six (6) months from the date this  
notice was personally delivered or deposited in the mail to file a court action on this  
claim." (See Government Code § 945.6)

"NOTE: This six-month filing period applies only to State Court actions. If your  
action is based on federal law and/or you intend to file it in Federal Court, a shorter or  
longer period within which to file the action may apply."

"You may seek the advice of an attorney of your choice in connection with this  
matter. If you desire to consult an attorney, you should do so immediately."

RICHARD H. INMAN  
Mariposa County Administrative Officer/  
Risk Manager

PROOF OF SERVICE BY MAIL (1013a, 2015.5 C.C.P.)

STATE OF CALIFORNIA, COUNTY OF MARIPosa:

I am a citizen of the United State and a resident of the County aforesaid. I am  
over the age of eighteen years and not a party to the within entitled action; my business  
address is 5100 Bullion Street (P.O. Box 784), Mariposa, CA 95338. On January 12,  
2005, I served the within Notice of Rejection of Claim on the claimant in said action by  
placing a true copy in a postage paid envelope addressed to the person(s) hereinafter  
listed, by depositing said envelope in the U.S. Mail, or by placing a copy into an inter-  
ofice delivery receptacle located in Administration’s office:

Dallas Gore  
3966 Ben Hur Road  
Mariposa, CA 95338

I declare, under penalty of perjury, that the foregoing is true and correct.  
Executed on January 12, 2005 at Mariposa, California.

Rhonda Scherf
COUNTY OF MARIPosa CLAIM FORM

CLAIM OF ________________ )
(claimant) )
 )
 )
v. )
 )
COUNTY OF MARIPosa )
 )

TO THE BOARD OF SUPERVISORS OF MARIPosa COUNTY:

YOU ARE HEREBY NOTIFIED that: (PLEASE TYPE OR PRINT)

Claimant: Dallas Gore _____________________________

Whose address is: 3966 Ben hur 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 $ 389.00

This claim is based on: (CHECK APPROPRIATE BOX OR BOXES)

✓ Property Damage < > Other (LIST)

< > Personal Injury

< > Contract

which occurred on Sept. 29 , 2004 , in the vicinity of:

Ben hur rd.

(PLACE WHERE INCIDENT OCCURRED)

Describe generally the facts and circumstances that give rise to the claim: (PLEASE USE BACK OF THIS PAGE IF MORE SPACE IS NEEDED.)

I was driving down BenHur rd.

on the night of Sept. 29th on my way home when I ran over something that made my car jump I stopped ___

The name(s) of the public employee(s) causing claimant's injuries or damages

under the above-described circumstances is/are:
and I got cut and lacerated. I saw a large chunk of asphalt that was sticking out of the broken road. It flattened my tire so I went to a mechanic shop and found that my wheel was cracked and broken and my tire had a large hole in it. I got these tires for the winter and I cannot afford to replace this one. The mechanic shop estimated damage at $389.00. My claim is based on the neglect of maintenance on Ben Hur Rd.

Thank you

D. Dallas Averee
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)

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 & PROVIDE 3 REPAIR ESTIMATES)

$___________

$___________

Other damages (ITEMIZE)

$___________

$___________

TOTAL DAMAGES INCURRED TO DATE: $___________

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: $389.00

All notices or other communications with regard to this claim should be sent to claimant at: 3966 Ben Hur rd. Maripos Ca, 95338

Dated: 10-6-04 Signed: [Signature]

(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 § 915) of this chapter not later than six months 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 § 915) of this chapter not later than one year after the accrual of the cause of action.
**Doc's Auto Clinic**

**5104 Jessie Street**

**P.O. Box 1240**

**Mariposa, CA 95338**

**Phone** (209) 742-6150

**B.A.R. Reg. No.** AJ 134742

---

**Name:**

**Dana Asdakyan Giri

Address:**

**3946 San Hui Rd**

**City:**

**Mariposa, CA**

**License No.:** 101-172-77

**Year Make Model:** Honda CRV 1998

**Engine No.:** 10378

---

**Teardown Estimate:**

I understand that my vehicle will be reassembled in ___________ days shown here if I choose not to authorize the service recommended.

---

**Repair Order - Labor Instruction:***

- **Customer Bangladesh**
- **Description:** Repair of Transmission

---

**Recommended Service:**

1. Mount & Balance 2 Tires
2. Lubricate 4WD
3. Replace Air Filter
4. Replace Oil
5. Replace Serpentine Belt

---

**Labor Charge:**

**Sublet Repairs:**

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<th>174 Oil Change</th>
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**Parts:**

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