



**CITY OF MARTINEZ**

**CITY COUNCIL AGENDA  
September 19, 2007**

**TO:** Mayor and City Council  
**FROM:** Mercy G. Cabral, Deputy City Clerk  
**SUBJECT:** Rejection of Claim(s)  
**DATE:** September 11, 2007

**RECOMMENDATION:**

Reject Claim against the City by Pamela Perez, Claim #07-22, and order that the claimant be notified.

**BACKGROUND:**

Claims should be rejected, the claimant notified of the rejection, and referred to Municipal Polling Authority and/or the City Attorney. Government Code Section 912.6(4) provides, "If legal liability of the public entity ... is disputed, the City Council may reject the claim..."

The statute of limitations for filing a court action on a claim commences upon notification of rejection of claim.

**FISCAL IMPACT:**

No impact to General Fund.

**ACTION:**

Motion rejecting Claim against the City and order that the claimant be notified of rejection.

Attachment: Claim(s)

**APPROVED BY:**

City Manager



**CLAIM PRESENTED TO THE CITY OF MARTINEZ**  
 \* Please read the instructions on the back before completing.

Reserve for filing stamp

07-22

**RECEIVED**  
 AUG 2 2007

CITY OF MARTINEZ  
 CITY CLERK'S OFFICE

1. Claimant's Name: (PRINT) PAMELA L. PEREZ  
 Address: 1153 Delacy Ave, Mtz. 94553  
 Day Phone: 925 812-0599 Eve Phone: 925 812-0599

2. When did the damage or injury occur?  
 Month: July Day: 28<sup>th</sup> Year: 2007 Time: a.m./p.m. 2:15 Police Report # \_\_\_\_\_

3. At which location did the damage or injury occur?  
Joe DiMaggio Dr. - behind the ball field.

4. a. What happened and why is the City responsible? parked my car at the end, (in court), of J. Dimaggio Dr. to watch Battle of the Barns Horseshow. Walked back to my car to find my rear window shattered and a softball in the backseat. There were 2 other cars with shattered windows also. This parking area was not a red zone, no parking zone. No park at your own risk sign either.  
 b. Name and position of responsible City Employee(s), if known: \_\_\_\_\_

5. What damage or injury occurred?  
rear window shattered completely with softball found inside of car.

6. Claim amount (only if less than \$10,000): \$ 664.44  
 If the amount exceeds \$10,000, please check (X) the court of appropriate jurisdiction:  
 Municipal Court (claims up to \$25,000)  Superior Court (claims over \$25,000)

7. How did you arrive at the amount claimed? Please attach documentation.  
receipt of glass repair attached.

8. I declare under penalty of perjury under the laws of the State of California that the following information is true and correct, and that this declaration was executed on Aug 2nd, 2007 at Martinez CA.  
Pamela Perez  
 Signature of Claimant or Representative's Signature

9. **Official Notices and Correspondence**  
 If represented by an insurance company or an attorney, please provide the information requested below.  
 Name and Capacity: (PLEASE PRINT) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Daytime Telephone: ( ) \_\_\_\_\_ Evening Telephone: ( ) \_\_\_\_\_