

OFFICE OF THE CITY CLERK  
1243 National City Blvd., National City, California 91950  
619-336-4228 phone / 619-336-4229 fax

To: Risk Manager

Date: 2/5/24

From: City Clerk's Office

Re: \_\_\_\_\_

Personal Information

(Claimant / Plaintiff / Requester)

Our office received the following document/s:

- Claim for Damages – Hand-Delivered
- Claim for Damages – Delivered via USPS Mail
- Claim for Damages – Delivered via UPS
- Claim for Damages – Delivered via FED-EX

Date Received: 2/5/24

Staff member to contact for questions regarding receipt:

\_\_\_\_\_  
Personal Signature

We are forwarding the above document/s to your office for further action.



City Of National City

RECEIVED

FEB 05 2024

Office of the City Clerk  
City of National City

### CLAIM FOR DAMAGES TO PERSON OR PROPERTY

#### INSTRUCTIONS

1. Read entire claim form before filing.
2. This claim form must be signed at bottom.
3. Attach separate sheets, if necessary, to give full details. SIGN EACH SHEET.
4. Claims must be filed with the City Clerk, 1243 National City Boulevard, National City, CA 91950 (619) 336-4228.
5. Inquiries regarding status of filed claims should be directed to the Risk Manager at (619) 336-4370.

Attention: City Clerk

The undersigned hereby presents the following claim to the City of National City, in accordance with the laws of the State of California.

1. Name of Claimant: Personal Information
2. Home Address of Claimant: Personal Information National City CA 91950  
Home Telephone Number: Personal Information /Cell: Personal Information  
Email: Personal @aol.com
3. Give address to which you desire notices or communications to be sent regarding this claim:  
Personal Information Chula Vista, CA 91915
4. How did DAMAGE or INJURY occur? Give full particulars:  
See the attached aerial photo. During the 1/22/24 storm event, the inlet to the city's 42" ± storm drain in East 2nd Street became clogged with overgrown ice plant and debris. Water continued to back up until it overtopped my parents driveway at 3135 and knocked over our chain link fence.
5. When did DAMAGE or INJURY occur? Give the date and time of day:  
January 22, 2024 between 10-10:30 am
6. Where did DAMAGE or INJURY occur? Describe fully, and attach diagram where appropriate. Give street names and addresses and measurements from landmarks:  
Fence damage occurred at the east end of East 2nd Street, between the Sweetwater Authority parcel and my parents driveway.

7. What particular ACT or OMISSION do you claim caused the injury or damage? Give names of City employees causing the injury or damage, if known:

City's failure to maintain the area around the inlet caused damage to my parents fence.

8. What DAMAGE or INJURIES do you claim resulted? Give full extent of injuries or damages claimed:

Approximately 65 LF of chain link fence was damaged in the area shown.

9. NAMES of physicians, hospitals, etc.:

N/A

10. What AMOUNT do you claim on account of each item of injury or damage as of date of presentation of this claim? Explain how you calculated this amount.

\$2,800.00 based on estimates received

Give ESTIMATED AMOUNT as far as known you claim on account of each item of future injury or damage, giving basis of computation:

N/A

11. What INSURANCE PAYMENTS did you receive, if any, and what were the names of any Insurance Company(ies):

None due to no flood insurance. Property has been owned since 1969 and flooding like this never happened.

12. What EXPENDITURES did you make on account of accident or injury: (Date-Item) (Amount):

None to date but will contact with Fence Co. soon.

13. Give NAMES AND ADDRESSES of Witnesses, Doctors and Hospitals:

Personal Information

Attach COPIES of any photos, documents or receipts you wish considered.

I declare under penalty of perjury that I have read the foregoing claim and the papers attached thereto, and that the same are true and correct to the best of my knowledge.

DATE: Feb 5, 2024

Personal Information

Claimant or Agent

Personal Information

Address of Above

Chela Vista 91915

Personal Information

Telephone No. of Above

Google Maps



City, CA 91950

Property fence damaged  
by Jan 22, 2024 storm



Imagery ©2024 Airbus, Maxar Technologies, Map data ©2024 Google 20 ft



Culvert headwall  
blocked with weeds  
and debris.

[REDACTED]  
National City, CA 91950



View looking northwest at the east driveway  
of [REDACTED]. Fence knocked down  
during Jan 22, 2024 storm due to obstruction  
in culvert.

Estimate: Tues 1/30 12:00  
 DATE TIME  
Ryan 619-971-8967

**Alpine Fence, Inc.**  
 2038 Alpine Blvd. Alpine, Ca 91901  
 Bus (619) 659-9320 • Fax (619) 659-9321  
 www.alpinefencecompany.com  
 STATE CONTRACTORS LIC. NO. 602530

1-30 -24  
 DATE  
Yelp C  
 LEAD REF

PROJECT MANAGER		CELL#	JOB LOCATION	
NAME <u>Rose Caraget</u>			STREET ADDRESS	
STREET ADDRESS			CITY, STATE, ZIP	
CITY, STATE, ZIP <u>National City 91950</u>			PHONE	
PHONE RES. A/WK <u>619-415-8981</u>			CONTACT	
EMAIL/FAX <u>Rose Budson 88 @ AOL.com</u>			CROSS STREET <u>Harbison</u>	

**SPECIFICATIONS**

OVERALL LENGTH <u>83'</u>	OVERALL HEIGHT <u>5'</u>	CONTOUR <input type="checkbox"/> STRAIGHT <input type="checkbox"/> LEVEL <input type="checkbox"/> HILLSIDE <input checked="" type="checkbox"/> ROLLING <input type="checkbox"/> TERRACE	INSTALL FENCE <input type="checkbox"/> STRAIGHT TOP <input type="checkbox"/> DOG TIGHT <input checked="" type="checkbox"/> FOLLOW CONTOUR	LINE STAKES BY CUSTOMER <u>Yes</u> <input type="checkbox"/> HAUL <input type="checkbox"/> DEBRIS	REMOVE <input type="checkbox"/> DEBRIS <input type="checkbox"/> BRUSH <input type="checkbox"/> DEBRIS
WALK GATE(S)	DRIVE GATE(S)				

**CHAINLINK**

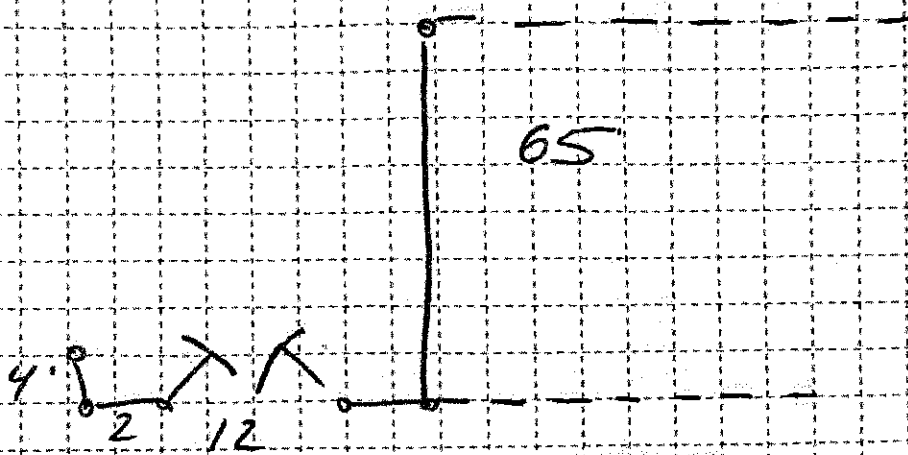
**VINYL, WOOD OR ORNAMENTAL STEEL**

WIRE GAGE <u>11 1/2</u>	LINE POST SPACING <u>10</u>	DIA. GATE POST <u>2 3/4</u>	<input checked="" type="checkbox"/> KNUCKLE UP <input type="checkbox"/> BARD UP	FENCE TO HAVE <input type="checkbox"/> HORZ. BRACES <input type="checkbox"/> DIA. BRACES <input checked="" type="checkbox"/> TOP RAIL	TYPE <u>5' Galv. Chainlink</u>
DIA. TERA POST <u>2 3/8</u>	DIA. LINE POST <u>1 7/8</u>	DIA. TOP RAIL <u>1 3/8</u>	DIA. GATE FRAME <u>1 5/8</u>		STYLE

**FENCE PLAN (NOT TO SCALE)**

\* Customer to Remove all plants & debris before day of install.

\* Non-prevailing wage



WE HEREBY PROPOSE TO FURNISH MATERIALS AND LABOR IN A WORKMANLIKE MANNER ACCORDING TO STANDARD PRACTICES SPECIFICATIONS. FOR THE SELLER X _____		THIS PROPOSAL GOOD FOR 30 DAYS		INSTALLED PRICE <u>2900</u>
ACCEPTANCE: THE ABOVE SPECIFICATIONS AND CONDITIONS STATED HEREON AND THE REVERSE SIDE HEREOF ARE SATISFACTORY AND ARE HEREBY ACCEPTED. I UNDERSTAND THIS AGREEMENT MAY BE CANCELED BEFORE MIDNIGHT OF THE THIRD DAY (EXCLUDING SUNDAY) AFTER THE DATE OF MY SIGNATURE. FURTHERMORE I UNDERSTAND THAT THIS AGREEMENT IS SUBJECT TO THE MECHANICS GIVEN LAW CALIFORNIA CODE OF CIVIL PROCEDURE SECT 1181 ET SEQ AS PRINTED ON THE REVERSE SIDE HEREOF.		DATE OF SIGNATURE _____ BUYER _____		DEPOSIT (S)
DATE OF SIGNATURE _____ BUYER _____		TERMS: PAYMENT IN FULL DAY OF COMPLETION		TOTAL
				3% CONVENIENCE FEE ADDED FOR CREDIT CARD PAYMENTS.

# Redaction Log

Reason	Page (# of occurrences)	Description
Personal Information	1 (1) 2 (6) 3 (4)	Under Government Code section 6255(a), personal contact information is exempt under protection of the California Public Records Act, and has been withheld on some documents responding to your request. Personal information being withheld is in the interest of the applicantowner and their right to privacy which outweighs the public interest of disclosure.
Personal Signature	1 (1)	Personal Signature - Redacted for cyber protection