



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: 7/22/24

From: City Clerk's Office

Re: [REDACTED]

(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: 7/22/24

Staff member to contact for questions regarding receipt:

[REDACTED]

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

RECEIVED

JUL 22 2024

Office of the City Clerk
City of National City



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: [REDACTED]
2. Home Address of Claimant: [REDACTED] National City, CA 91950
Home Telephone Number: _____ /Cell: _____
Email: dmartini@singletonschreiber.com

3. Give address to which you desire notices or communications to be sent regarding this claim:
J. Domenic Martini, Esq., 591 Camino De La Reina, 1025, San Diego, CA 92108

4. How did DAMAGE or INJURY occur? Give full particulars:
See claim addendum.

5. When did DAMAGE or INJURY occur? Give the date and time of day:
January 22, 2024

6. Where did DAMAGE or INJURY occur? Describe fully, and attach diagram where appropriate. Give street names and addresses and measurements from landmarks:
See claim addendum

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:

See claim addendum

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

See claim addendum

9. NAMES of physicians, hospitals, etc.:

See claim addendum

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.

See claim addendum

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

See claim addendum

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

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

See claim addendum

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

See claim addendum

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: July 19, 2024

J. Domenic Martini, Esq.

Claimant or Agent

591 Camino De La Reina, 1025,
San Diego, CA 92108

Address of Above

619-860-8541

Telephone No. of Above



City Of National City

FREQUENTLY ASKED QUESTIONS REGARDING THE CLAIMS PROCESS

- **Where do I get a Government Tort Claim form?**

Download Claim for Damages to Person or Property Form at www.nationalcityca.gov or you may pick up a claim form at the Office of the City Clerk, located at 1243 National City Boulevard, National City, CA 91950. The City Clerk's telephone number is (619) 336-4228. Also, you can request a claim form be mailed to you via telephone at (619) 336-4300.

- **Does it cost me anything to file a claim?**

No. The City does not charge a fee to file a claim.

- **How long do I have to file a claim?**

Most claims must be submitted to the City Clerk within 6 months of the time the event or incident giving rise to the injury, loss or damage occurred. However, certain types of claims may be filed within 1 year of the date of the event or incident. Additionally, the Government Code provides for other exceptions to the general 6 month period. If you aren't sure whether or not you fall within one of the exceptions, you should contact an attorney. City staff members are prohibited from providing legal advice.

- **What information may I send with my claim form?**

You may provide any information you believe will support your claim. For example, claims are often submitted along with photographs, receipts, estimates or diagrams. Please keep copies of any documents you submit because the City will not return any documents to you.

- **Can I fax or email the completed claim form to the City Clerk, instead of mailing or dropping it off?**

The City only accepts properly completed claims that are either (1) personally delivered to the City Clerk's office, or (2) mailed to the City Clerk's office. The claimant's original signature must appear on the claim form. The City does not accept claims submitted by email or facsimile.

- **What happens to the claim after I submit it?**

The City Clerk forwarded to the Risk Manager for review and further investigation. Depending on the facts or nature of the incident, most claims are processed within 45 days pursuant to the Government Code. You will be contacted if the Risk Manager has questions regarding your claim. If not, the Risk Manager will determine whether to approve, compromise, or deny the claim. The City's final decision will be mailed to the address listed on the claim submitted to the City.

- **What happens if my claim is denied?**

As required by the Government Code, the City provides all claimants (whose claims have been denied) a standard, written response outlining a claimant's legal remedies.

- **Is the City responsible for claims that happen while riding a public trolley or bus?**

Both the San Diego Trolley and San Diego Transit (public buses) are under the jurisdiction of the Metropolitan Transit System ("MTS"). To file a claim against MTS, contact Public Transit Customer Service at (619) 238-0100.

1 **Government Claim Form Addendum**

2
3 **Claimants:** [REDACTED]

4
5
6
7 **Affected property address:** [REDACTED] National City, CA 91950

8
9 **Date of Incident:** January 22, 2024 – Chollas Creek Flood Event.

10
11 **Send official notices and correspondence to:**

12
13 J. Domenic Martini (SBN 324064)
14 SINGLETON SCHREIBER, LLP
15 591 Camino de la Reina, 1025
16 San Diego, CA 92108
17 619-860-8541

18 Claimants request that all claim communications be sent to
19 dmartini@singletonschreiber.com
20 Chollascreekservice@singletonschreiber.com

21 **Basis of claim:**

22 Claimants bring this claim against National City in conjunction with their claims against the
23 City of San Diego for the flooding arising from the failed Chollas Creek drainage infrastructure.
24 Claimants home was flooded and sits within or at the border of National City's jurisdiction.
25 Claimants believe that some of National City's drainage infrastructure may have caused or
26 contributed to the flooding that Claimants suffered, but at this time are limited by their ability to
27 determine the extent of National City's responsibility or the exact infrastructure that caused
28 Claimants' harm. Claimants are limited by the 6 month government claims statute and file this claim
to preserve their rights as investigation into the cause of the flooding and the responsible parties
continues. Claimants address should assist National City in identifying nearby infrastructure and
conducting an investigation into its ownership, maintenance, and use.

1 Claimants were victims of this predictable “unnatural” disaster when multiple government
2 entities failed to maintain and improve their drainage infrastructure. They suffered harms outlined in
3 the damages section below.

4 At this time, the full extent of National City’s notice, lack of maintenance, and other acts or
5 omissions forming the basis of its liability are not known. Claimant(s) do not intend this statement to
6 constitute a comprehensive list of the entire basis of the City’s liability.

7 Claimants intend to bring the following legal causes of action:

8 Dangerous condition of public property (Gov. Code § 835)

9 Inverse condemnation

10 Trespass

11 Public and private nuisance

12 Violation of Government Code § 12955.8 – Fair Employment and Housing Act

13 Code of Civil Procedure section 526

14 These causes of action are not all-inclusive, nor are all facts forming the basis for the City’s
15 liability known to Claimants at this time.

16 **Damages:**

17 Claimants seek the following categories of damages:

18 Damage Type	Description & Repair	Damage Value
19 Real Property 20 <input checked="" type="checkbox"/> Renters	Claimants’ home was damaged by quickly rising flood waters that entered the home.	Not applicable.
21 Personal Property	Claimants’ personal belongings were damaged by the 22 flooding.	To be determined.
23 Evacuation	Claimants were home at the time of the flood. [REDACTED] 24 saw her mom’s bed flooded, water was high and the 25 only way to get her mom out was up, they used a “lift 26 plastic sheet”. They couldn’t get out, so all residents 27 had to stay on the second floor. When [REDACTED] 28 opened the front door, water rushed in and	To be determined.

1		completely flooded the 1st floor of house. She then	
2		called the paramedics, but firefighters showed up	
3		instead. The firemen did not have a stretcher, so	
4		██████ used her own special sheet, to lift her mom.	
5		██████ a was expecting to work things out with her	
6		landlord for her family to move back in after repairs,	
7		but the landlord did not follow up on requests and	
8		just asked them to move. The home was	
9		uninhabitable, so they sought shelter at ██████	
10		daughter's house.	
11	Vehicle Damage	Claimant's vehicle was damaged due to the flood.	\$5,625.50+
12	Loss of	Due to the flood destroying their property, they had	\$4,616.98+
13	use/diminution in	to pay out of pocket expenses for food, clothing,	
14	value/new living	storage, and shelter. The flood has caused every area	
15	expenses	of their lives to become more difficult.	
16		(see attached receipts)	
17	Lost wages	Not applicable.	Not applicable.
18	Personal	Claimant ██████ had pre-existing medical	To be determined.
19	injury/Medical	conditions that have been exacerbated by the flood.	
20	expenses	She suffers from ██████ that now faces	
21		heightened risks due to disruption of routine,	
22		potential evacuation challenges, and increased stress.	
23		(See attached medical record)	
24	Wrongful death	Not applicable.	Not applicable.
25	damages		
26	Pain, suffering,	Claimants experienced acute distress during the	To be determined.
27	emotional distress,	flood, characterized by fear, anxiety, and panic as	
28	inconvenience	they navigated the immediate danger to themselves.	

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

	The flood has brought a huge emotional and financial burden on the claimants.	
TOTAL:		\$10,242.48+

Supporting documentation is attached. Claimants can provide additional supporting documents upon request.

Dated: July 19, 2024

SINGLETON SCHREIBER, LLP

By:



J. Domenic Martini, Esq.