

NOTICE OF CLAIMS AGAINST THE CITY OF TUCSON

The claim form must be filled out completely and:

MAILED TO:

City of Tucson
City Clerk's Office
P.O. Box 27210
Tucson, AZ 85726-7210

OR

HAND CARRIED TO:

City of Tucson
City Clerk's Office
255 West Alameda
9th Floor

If you have questions regarding this form or the claims process, please call the City of Tucson's Risk Management Office at (520) 791-4728. The City Clerk may not accept service of claims or lawsuits filed against individual employees or their spouses.

Claimant may wish to review applicable laws, such as the following:

1. Arizona Revised Statutes § 12-821 (excerpt listed at bottom of the Notice of Claim form)
2. Arizona Rules of Civil Procedure [Volume 16, Rule 4.1 (b)]
3. Tucson City Charter [Chapter XXV, Section 12 (with the exception of the 60-day claim filing period which has been superseded by the period specified in Section 12-821.01, Arizona Revised Statutes)].

FOR CITY CLERK USE ONLY

1. ☒ Notice of Claim ☐ Lawsuit ☐ Subpoena Log # 25572

☐ Claim/Lawsuit Involves a Juvenile

Date of Birth: _____

2. Received By -- Deputy City Clerk: A. Turner

3. Describe: _____

Received on Behalf of: _____

Authorization on File?

(Department Director or Code Official):

☐ Yes ☒ No

Does this claim Involve a Minor? ☐ Yes ☒ No

Attachments Included: ☒ Yes ☐ No

Number of Pages: 5 (Include Notice of Claim Form and Information Sheet)

Number of Photos: 2 BW ☒ Color ☐

Photos Received In Risk Management By: _____ Date: _____

Date/ Time Received

CITY OF TUCSON
RECEIVED
2016 DEC 27 AM 10:33
OFFICE OF THE
CITY CLERK

4. Method of Receiving Notice of Claim/Lawsuit:

☐ Process Server Name: _____

or

☐ Messenger Server Signature: _____

☐ Personal Delivery Name: _____

☐ Signature: _____

☒ Regular Mail

☐ Certified Mail - Receipt # _____

☐ Other (Specify: _____)

5. Email Distribution of Notice Claim (Courtesy Copies)

☒ Risk Manager Date: _____

☐ City Attorney Date: _____

☐ Date: _____

☐ Date: _____

Received By: _____

Received By: _____

Received By: _____

Received By: _____

Subpoenas Only:

Check # _____ ☐ Cash Amount \$ _____

Payee: _____



NOTICE OF CLAIM AGAINST THE CITY OF TUCSON

Pursuant to A.R.S. Sections 12-821 & 12-821.01
(and other applicable laws listed in the Instructions for Filing Your Claim)

Risk Management Use only- CLAIM #					RECEIVED IN CITY CLERK'S OFFICE	
Name <i>Tangerine Crossing HOA/AAM LLC</i>				Date of Birth		
Address <i>6885 N. ORACLE ROAD # D</i>				Apt# <i>BLDG 11</i>		
City <i>Tucson</i>	State <i>AZ</i>	Zip Code <i>85704</i>	Home Phone <i>520.219.7200</i>	Cell Phone		
CLAIM FACTS						
Occurrence Date <i>6-23-2016</i>		Time of Day <i>Unknown</i>		Location (Street Address/Intersection) <i>Tangerine Rd : Tangerine Drive</i>		
Description of What Happened (specify the event, act, or omission causing damage or injury) Attach additional pages, if necessary. <i>GATE STUCK CAR pushed gate bent ARM on gate</i>						
Property Damage? Describe the property and extent of damage(s) sustained. Attach estimates, appraisals, and repair bills, if available. <i>GATE OPERATOR ARM BENT - ENTRY SIDE</i>						
Bodily Injury? Describe the nature of the injury and when you first became aware of the injury. Attach copies of bills/receipts, if available. <i>NONE REPORTED</i>						
Cause of damages and/or injuries: <i>BENT Gate Operator Arm</i>						
Reasons why the City is responsible for your damages and/or injuries: <i>OFFICER CAR INVOLVED pushed gate bent Arm</i>						
List names and addresses of witnesses, involved parties, and treating physician(s):						
Name <i>NONE</i>		Address			Daytime Phone	
Photographs Attached?		Bills, Records, Receipts, Estimates and/or Invoices Attached?				
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
Damages Claimed						
Property Damage: <i>GATE OPERATORS REPAIR BIDS \$10,500 & \$7,306.70</i>				\$		
Bodily Injury:				\$ <i>N/A</i>		
Other - Please specify:				\$		
State the amount you would settle this claim should liability be found against the City \$						
I, the undersigned, do solemnly swear (or affirm) that all of the above statements are true to the best of my knowledge and belief.						
<i>12-21-2016</i> Date		<i>Charlotte Presto</i> Signature <i>Community Manager, AAM, LLC</i>				
This form is provided to assist in filing a claim with the City of Tucson that complies with the requirements of A.R.S. § 12-821 and 12-821.01, which defines the requirements of filing a claim against a public entity in the State of Arizona. Failure to file a proper claim prior to the expiration of the statute of limitations may result in your claim being denied. Filing a valid, timely claim remains the claimant's sole responsibility.						
A.R.S. § 12-821: All actions against any public entity or employee shall be brought within one year after the cause of action accrues and not afterward.						
A.R.S. § 12-821.01: Persons who have claims against a public entity or a public employee shall file claims with the person or persons authorized to accept service for the public entity or public employee as set forth in the Arizona rules of civil procedure within one hundred eighty days after the cause of action accrues. The claim shall contain facts sufficient to permit the public entity or public employee to understand the basis on which liability is claimed. The claim shall also contain a specific amount for which the claim can be settled and the facts supporting that amount. Any claim that is not filed within one hundred eighty days after the cause of action accrues is barred and no action may be maintained thereon.						
A proper notice of claim must be filed and denied before suit may be filed against a public entity or public employee. A claim will be barred by the statute of limitations if a lawsuit is not filed within one year after the cause of action accrues.						
IT IS A CRIMINAL OFFENSE TO FILE A FALSE CLAIM. (Penal Code A.R.S. § 13-2311 - Insurance Code 44-1220)						

Charlotte Preston

From: Charlotte Preston
Sent: Friday, September 16, 2016 1:52 PM
To: Charlotte Preston
Subject: FW: Tangerine Gate Crossing Northbound gate
Attachments: 20160622_061755.jpg; 20160622_062302_1.jpg; 20160622_064426_1.jpg; 20160622_063139_1.jpg; 20160622_062352_1.jpg

From: Chad Kasmar [<mailto:Chad.Kasmar@tucsonaz.gov>]
Sent: Thursday, June 23, 2016 5:31 PM
To: Robin Marsch <rmarsch@AssociatedAsset.com>
Subject: Tangerine Gate Crossing Northbound gate

Hello Robin, thank you for taking the time to speak to me today. I have attached several pictures to capture the damage I located on the gate. Our department member lives within your gated community. When they opened the gate the gate on the east failed to completely open and in stuck the hood of the car. The 3rd picture in captures the damage to the arm that needs to be replaced. The gate opens freely when cycled but the bend in the arm keeps the eastern gate from being perfectly aligned with the adjacent gate to the west. While we can not confirm that the collision was the cause of the damage it is certainly possible that it was. Please let me know what the cost to replace the arm is. Thanks Chad

Captain Chad Kasmar #37363
Tucson Police Department
Chief of Staff
Chad.Kasmar@tucsonaz.gov
520-837-7714

Proposal and Contract

Owner/Buyer

TANGERINE CROSSING HOMEOWNERS ASSOCIATION
C/O AAM, LLC
6885 N Oracle Rd Bldg. 11 Suite D
Tucson, Az. 85704
Attn: Ms. Charlotte Preston, Community Manager

Date: 19 July 2016 SIs: JS No: 160364
Project: Replace Operators due to Damage
Location: Tangerine Crossing
Phone: 520.682.1357 (P)
E-Mail: cpreston@associatedasset.com

ANTECH CORPORATION, hereafter referred to as "Antech", proposes to furnish, for the above named Owner/Buyer, hereafter referred to as "Owner", in accordance with the Scope of Work and/or Project Specifications herein and subject to the terms and conditions set forth below of this legal document.

SCOPE OF WORK The entry gate operators were damaged due to a vehicle hitting them. The existing operators sustained extensive damage to the gear boxes. The manufacturer no longer makes the gear boxes for these operators so they will have to be replaced. They are currently working, but our temporary fix will not last for long.

Remove and replace two (2) operators with Liftmaster CSW24U Operators due to vehicular damage, including integration with existing equipment.

Total Investment \$ 10,500.00



Eagle Gateworks Inc.

1645 W. Valencia Rd. #109-174

Tucson, AZ 85746

ROC 241135 *EagleGateworks@cox.net*

Phone # **520-631-7109** Fax # **866-481-3649**

Proposal

Date	Proposal #
12/12/2016	3016

Name / Address
Tangerine Crossing HOA

Job Info

THIS PROPOSAL IS VALID FOR 45 DAYS FROM DATE OF SUBMISSION

Description	Qty	U/M	Total
Complete Hysecurity Swing Smart DC Master/Slave Swing Gate Operator System, Includes 2 Operators W System Batteries, Built in Charge Controllers, 3 Hy-5 Loop Detectors, 1 Photo eye to meet UL 2016, Installation onto existing Mounting pads to replace damaged operators, Reuse Existing Inground Loops (Due to UL 325 2016 changes, Original Operators are no longer available) 1 Yr Warranty on Supplied Labor, Parts and Materials (Excluding abuse or tampering.) Excludes Reused Equipment.			7,306.70

50% Down, Balance due upon completion
THANK YOU FOR CONTACTING EAGLE GATEWORKS INC

If you have any questions Please call Brett @ 520-631-7109	Subtotal	\$7,306.70
Please sign and date this proposal and fax back to my office when you are ready to proceed	Sales Tax (0.0%)	\$0.00
Accepted _____ Date _____	Total	\$7,306.70

Warranty Policy: 30 Days On Labor, 30 Days on Installed Electrical Parts, 90 Days on Mechanical Parts,
1yr Parts and Labor on new system installation

We Accept

VISA





