NOTICE OF CLAIM AGAINST THE COUNTY OF MENDOCINO

(Government Code Section 910 et seq.)

* Claims related to injury to person or damage to personal property must be presented to the County within (6) months from the date of loss. * Claims related to any other loss must be presented not later than (1) year from the date of loss. * Answer all items fully and to the best of your knowledge and information. Failure to do so many result in long claim treate found insufficient.	•
* If more space is needed to provide requested information, please attach additional pages identify on the concerning your claim should be obtained from your own lawyer. * Legal advice concerning your claim should be obtained from your own lawyer.	
DEC 28 2011	
MAIL COMPLETED FORM TO: EXECUTIVE OFFICE	
Mendocino County Board of Supervisors	
Attn: Clerk of the Board 501 Low Gap Road, Room 1090	
Ukiah, CA 95482 Date Received by BOS	
1. Claimant's Name: North Gualala Water Company Daytime Phone: (101-484-3579	
c/o James F. King, Mannon, King & Johnson	
2. Claimant's Mailing Address: p.o. Box 410, Uktah, CA 95482	
Attorney's phone: 707-468-9151 3. Home Phone: () Date of Loss: 12-28-2010 Time of Loss: All day	
4. Location of Loss (Specify in as much detail as possible, example: corner of State and Perkins): Sunsat: Drive, unincorporated area of Gualala, Mendocino County	
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5. Description of incident/accident which caused you to make this claim. Lands idd and debuta flow caused by culvers wlogging and fallure. Understand	
culvert was unable to accommodate heavy rain event. Claimant seeks damages based on inverse condemnation and tort theories.	•
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6. What specific injury, damages or other losses did you incur? <u>Destruction of pump house</u> . <u>Lines</u>	
and other facilities affixed to real property. This is claim for damage of real property.	ert
Also damage to real property.	
7. What amount of money are you seeking to recover? (check one of the boxes below)	
The amount claimed is less than \$2,000 Enter the amount claimed here: \$	
Please attach any and all itemized bills, repair estimates, receipts, etc.	
Please attach any and all itemized bills, repair estimates, receipts, etc.	*** **
8. What are the name(s) of the County employee(s) whom you allege caused your injury, damage or loss, if known? thing thing.	
9. All notices and communications with regard to this claim will be directed to the Claimant shown in lines 1	
and 2 above.	
I/WE, the undersigned, declare under penalty of perjury that I/WE have read the foregoing claim for dam-	
ages and know the contents thereof; that the same is true of my/our own knowledge and belief, save and except as to those matters wherein stated on information and belief, and as to them, I/WE believe to be	
Attorney for North Gualala (Must Muy December 28, 201)	•
Claimant Signature Date Signed	•

0: 12-28-11 25 Co, Risk

INSTRUCTIONS (Please read carefully):

CARMEL J. ANGELO Chief Executive Officer Clerk of the Board



COUNTY OF MENDOCINO BOARD OF SUPERVISORS

Contact Information 501 Low Gap Road • Room 1010

Ukiah, California 95482 TELEPHONE: (707) 463-4221 FAX: (707) 463-7237

Email: bos@co.mendocino.ca.us

Web:

www.co.mendocino.ca.us/bos

January 24, 2012

North Gualala Water Company c/o James F. King Mannon, King, Johnson P.O. Box 419 Ukiah, CA 95482

Dear Mr. King:

NOTICE IS HEREBY GIVEN that the claim you presented to the County of Mendocino on December 28, 2011 was rejected on January 24, 2012.

WARNING

Subject to certain exceptions, you have only six (6) months from the date that this notice was personally delivered or deposited in the mail to file a court action on this claim. [See Government Code § 945.6] You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult with an attorney, you should do so immediately.

Please also be advised that pursuant to California Code of Procedure sections 128.5 and 1038, the County will seek to recover all costs of defense in the event an action is filed in the matter and it is determined that the action was not brought in good faith and with reasonable cause.

Very truly yours,

COUNTY OF MENDOCINO BOARD OF SUPERVISORS

Dated:	By:
	Carmel J. Angelo, Clerk
CJA/jc	

cc: County Counsel

Kristin McMenomey, Risk Manager

THE BOARD OF SUPERVISORS