

11  
H-2

**AGENDA ITEM  
REQUEST/JUSTIFICATION FORM**

*(To be completed by requesting Department)*

Forward all requests to Sharon Bourke, LC2 Civic Center

**DEADLINE SUBMITTAL IS 3:00 P.M. WEDNESDAY  
BEFORE THE TUESDAY MEETING**

Agenda item: Consent – Tort Claim

(i.e. Consent/Recognition-Proclamation/Presentation/Public Hearing/Committee, etc.)

Date to be on agenda: October 18, 2016

Exact wording to be used for the agenda: Daniel A. Esch, County

Clerk, presenting claim of the following pursuant to the Nebraska Political

Subdivisions Tort Claims Act: Sharon J. Cooney

Action requested: Refer to County's Risk Manager for review and determination.

Amount requested: \$ 600,000.00 Object Code: N/A

Is item in current year's budget? N/A Yes        No       

Does this item commit funds in future years? Yes        No X

If yes, explain: N/A

If an agreement or contract, has the County Attorney reviewed and approved? N/A Yes    No   

Previous action taken on this item, if any: None.

Recommendations and rationale or action: Refer to County's Risk Manager for review and determination.

Will anyone speak on behalf of this item, if so who? N/A

If this is a rush agenda item, please explain why: N/A

Submitted by (Name & Dept.): Daniel A. Esch, County Clerk Ext. 7150

Date submitted: October 11, 2016

List Attachments: Claim letter, supporting documentation  
(Attach resolution and all pertinent documentation; i.e. contract, agreement, memorandums, etc.)

Certified resolutions can be obtained at the County Clerk's website:  
<http://www.douglascountyclerk.org/county-board-records/search-for-resolutions>

Completed by receiving office  
Received in Administrative Office: Date 10/11/16 Time

Darren R. Carlson\*  
Anne K. Burnett\*  
Michelle B. Miller-McCoy  
Mary "Peg" Stevens  
Andrew M. Ferguson  
Niel D. Nielsen  
Clete W. Blakeman\*

  
**CARLSON BURNETT**

Terry A. White\*  
Richard F. Hitz  
Karen S. Nelson  
Jack D. Horgan  
Alexis S. Mullaney\*  
DeAna K. Shaffer  
William J. Hale\*  
\*Also licensed in Iowa

October 6, 2016

**CERTIFIED MAIL, RETURN RECEIPT REQUESTED**

Daniel A. Esch  
County Clerk/Comptroller  
Douglas County  
1819 Farnam Street, Room H-08  
Omaha, NE 68183

Re: Notice Pursuant to Political Subdivision Tort Claims Act  
Our Client: Sharon J. Cooney  
County Employee: Alexandria J. Contreras-Sides  
Your Agency: Douglas County Corrections  
Date of Injury: October 15, 2015  
Location of Injury: 29<sup>th</sup> Street & Leavenworth Avenue, Omaha

**Nebraska Political Subdivision Tort Claim**  
**NOTICE OF CLAIM**

Mr. Esch:

Please be advised this office represents Claimant Sharon J. Cooney in her claims for injuries arising from the negligence of Douglas County Nebraska Correctional employee, Alexandria J. Contreras-Sides for her running a red light while operating a Douglas County owned automobile. Employee Contreras-Sides was operating a Douglas County owned vehicle in the course and scope of her employment on October 15, 2015 at the intersection of 29<sup>th</sup> and Leavenworth street in Omaha, Nebraska. See attached police report.

Claimant, Sharon J. Cooney, was injured when she was a passenger in an eastbound automobile on Leavenworth street driven by her husband Thomas M. Cooney. The Cooney vehicle entered the intersection on a green light. Douglas County Corrections employee Contreras-Sides entered the intersection at the same time and location on a red light from southbound 29<sup>th</sup> street causing a collision of the vehicles in the intersection of 29<sup>th</sup> street and Leavenworth. The negligence of Douglas County employee Alexandria J. Contreras-Sides is attributable to Douglas County by virtue of the doctrine of respondeat superior.

This letter shall serve as notice to you under the **Political Subdivisions Tort Claims Act, Neb. Rev. Stat. §13-901 et. seq.** that Sharon J. Cooney makes a claim for

OCT 11 2016

17525 Arbor Street | Omaha, NE 68130  
402.934.5500 | Fax 402.934.5920 | www.carlsonburnett.com

Douglas Co. Clerk/Comptroller  
Douglas County, Nebraska

compensation for her personal injuries suffered on October 15, 2015. Please accept this notice as Ms. Cooney's claim under the above cited Act.

The negligence of employee Contreras-Sides caused the following injuries to Sharon J. Cooney:

- a. right wrist distal radius intra-articular comminuted displaced distal radius fracture;
- b. right elbow olecranon fracture with complex elbow instability;
- c. right arm ulnar collateral ligament rupture and comminuted coronoid fracture;
- d. rib fractures, right side third through seventh ribs;
- e. closed head injury, concussion and frontal scalp and forehead abrasions; and
- f. right L4-5 endplate spinal compression fractures without cord involvement.

Claimant Sharon J. Cooney has \$139,006.63 in medical bills from this accident.

Claimant demands \$600,000.00 to pay for her medical bills, past and in the future, and to compensate her for her past and future pain, suffering and inconvenience.

Claimant will wait six (6) months for action on this claim as required under the Act.

Respectfully,

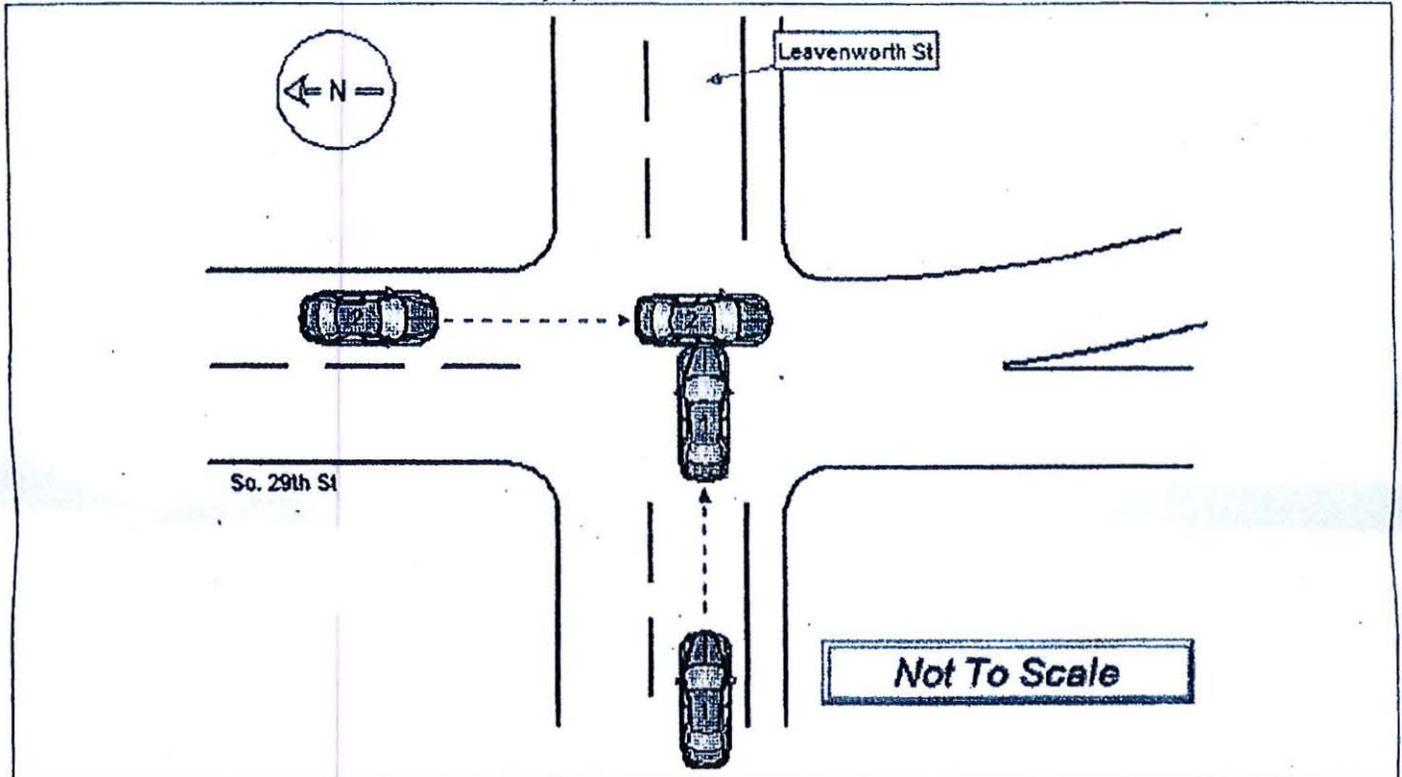


Richard F. Hitz  
For the Firm

Enclosure

# Investigator's Motor Vehicle Accident Report

2	Total Number of Vehicles	Local No / District	District 56	Agency Case No	AH27444	HIT & RUN?	No	INVESTIGATION MADE AT SCENE?	Yes	L	1						
A1	DATE OF ACCIDENT	MM/DD/YYYY	10/15/2016	Day	Thursday	TIME OF ACCIDENT	11:21	STATE USE ONLY									
A2	PLACE OF ACCIDENT	COUNTY	DOUGLAS COUNTY			POLICE NOTIFIED	11:23										
B	CITY	OMAHA			PRIVATE PROPERTY	No											
C	ROAD ON WHICH ACCIDENT OCCURRED	STREET / HIGHWAY NO	S 29th St			ONE-WAY STREET	Yes	LATITUDE									
D	DISTANCE FROM MILEPOST		HIGHWAY NO.		LONGITUDE												
E	IF AT INTERSECTION		IF NOT AT INTERSECTION														
V1/A	NAME OF INTERSECTING ROADWAY																
	Leavenworth St																
V2/A	R. WORK ZONE CODES	R1	R2	R3	R4	S. PEDESTRIAN CLASSIFICATION CODES	S1	S2	S3	S4	S5-a	S5-b	S6-a	S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS PROPERTY?		
		1													No		
E	VEHICLE NO. 1																
F	DRIVER LICENSE NO.	G18010479					STATE	NE	SEX	Male							
V1/H	DRIVER	THOMAS M COONEY				PHONE	(402) 651-5135		LOCAL NO	1356434							
V2/H	DRIVER ADDRESS	3234 S 45TH ST OMAHA, NE, 68106-0000					DATE OF BIRTH	11/13/1935									
V1/I	OWNER	THOMAS M COONEY				PHONE	(402) 651-5135		LOCAL NO	1356434							
V2/I	OWNER ADDRESS	3234 S 45TH ST OMAHA, NE, 68106-0000					CITATION	N		CITATION NO							
V1/O	LICENSE PLATE					EXPIRATION YEAR			STATE								
V2/O	VEHICLE	YEAR	2004	MAKE	CHEV	MODEL	IMPALA	BODY STYLE	11	COLOR	SIL	ESTIMATED DAMAGE	\$ 6,000				
V1/P	VEHICLE ID NO. (VIN)	2G1WF52E749118436					INSURANCE COMPANY	SAFECO INSURANCE CO									
V2/P	TOWED TO	IMPOUND				TOWED BY	ARROW		POLICY NO	X6739353							
E	VEHICLE NO. 2																
F	DRIVER LICENSE NO.	H12914169					STATE	NE	SEX	Female							
V1/H	DRIVER	ALEXANDRIA JUSTINE CONTRERAS-SIDES				PHONE	(402) 214-9949		LOCAL NO	3381028							
V2/H	DRIVER ADDRESS	[REDACTED]					DATE OF BIRTH	12/30/1986									
V1/I	OWNER	DOUGLAS COUNTY				PHONE			LOCAL NO	0914876							
V2/I	OWNER ADDRESS	1819 FARNAM ST OMAHA, NE, 68183					CITATION	N		CITATION NO							
V1/O	LICENSE PLATE	TRB933				EXPIRATION YEAR	2016		STATE	NE							
V2/O	VEHICLE	YEAR	2014	MAKE	FORD	MODEL	FUSI	BODY STYLE	11	COLOR	BLK	ESTIMATED DAMAGE	\$ 4,000				
V1/P	VEHICLE ID NO. (VIN)	1FA6P0G7E5393947					INSURANCE COMPANY	DOUGLAS COUNTY/GENESIS									
V2/P	TOWED TO	IMPOUND				TOWED BY	ARROW		POLICY NO	YXB301163							
Complete this section for all injured persons											DATE OF BIRTH (MM/DD/YYYY)	1	2	3	4	5	SEX
VEH #	NAME	ADDRESS	DATE OF BIRTH	Seal Position	Eject	Body Region	Injury Sev	Trans	SEX	M	F						
1	THOMAS M COONEY	3234 S 45TH ST OMAHA, NE, 68106-0000	11/13/1935	01	1	03	4	2	M								
LOCAL NO	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO														
1356434	Nebraska Medicine	OFD	44710														
1	SHARON J COONEY	3234 S 45TH ST OMAHA, NE, 68106-0000	01/29/1941	03	1	01	3	2	F								
LOCAL NO	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO														
1397443	Nebraska Medicine	OFD	44710														
2	ALEXANDRIA JUSTINE CONTRERAS-SIDES	[REDACTED]	12/30/1986	01	1	10	4	2	F								
LOCAL NO	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO														
3381028	Nebraska Medicine	OFD	44710														



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Driver #1 Stated that he was eastbound on Leavenworth St proceeding with a green light. Vehicle #2 then pulled in front of him while "trying to beat the light" and caused the accident. Driver #2 stated that she was going south through the intersection at 29th and Leavenworth when she was struck by vehicle #1.

No Independent witnesses located. R/Os unable to determine fault in the collision.

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle)				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS				
VEH NO.	N	S	W	ROAD OR HIGHWAY NAME	VEHICLE 1		VEHICLE 2		VEHICLE 1		VEHICLE 1		VEH 1	VEH 2	VEH 2	1
1			X	Leavenworth St					3							
2	X			S 29th St	POINT OF IMPACT	01	POINT OF IMPACT	03			2					
1		01		06 Turning left	MOST DAMAGED AREA	01	MOST DAMAGED AREA	03	1 Deployed - front	1 None used - vehicle occupant						
2		01		08 Entering traffic lane					2 Deployed - side	2 Lap & shoulder belt used						
				01 Essentially straight ahead	00 None				3 Deployed - both front/side	3 Shoulder belt only used						
				02 Backing	09 Top & windows	02	03		4 Not deployed	4 Lap belt only used						
				03 Changing lanes	10 Undercarriage	01			5 Not applicable/ No airbag available	5 Child safety seat used						
				04 Overtaking/ Passing	11 Total (all areas)				6 Unknown	6 Child booster seat used						
				05 Turning right	12 Other					7 DOT approved helmet used						
										8 Costume helmet used						
										8 Restraint use unknown						
OFFICER NO. 1401				TROOP/TEAM/BEAT 2A66				DEPARTMENT OMAHA PD				PHOTOS TAKEN? No				
INVESTIGATOR NAME John A GASKO				INVESTIGATOR SIGNATURE John A GASKO				DATE OF REPORT				10/15/2016				

**FRED'S  
FRIENDLY SERVICE**

2901 Leavenworth Street  
Complete Auto Repairing  
"Stop in Today for the  
Friendly Way"



402-342-9519

RON WACKERHAGEN



ROAD  
SERVICE

**CARLSON**  **BURNETT**

Carlson & Burnett, LLP  
17525 Arbor Street  
Omaha, NE 68130



0002 0627 0217



02 1P  
0001951242  
MAILED FROM 2

**CERTIFIED MAIL/RETURN RECEIPT REQUESTED**  
Daniel A. Esch, County Clerk/Comptroller  
1819 Farnam Street, Room H-08  
Omaha, NE 68183





**DANIEL A. ESCH**  
DOUGLAS COUNTY CLERK / COMPTROLLER  
**SHERI K. LARSEN**  
CHIEF DEPUTY DOUGLAS COUNTY CLERK

October 11, 2016

Sharon J. Cooney  
C/O: Richard F. Hitz  
Carlson Burnett  
17525 Arbor Street  
Omaha, NE 68130

Re: Tort Claim

To Whom It May Concern:

This letter is to inform you that the Douglas County Clerk's office is in receipt of your tort claim.

Said claim will be placed on the Douglas County Board of Commissioners' meeting agenda; to be held on Tuesday, October 18, 2016; at 9:00 a.m. in the Legislative Chamber of the Omaha-Douglas Civic Center, 1819 Farnam Street, Omaha, NE.

At that time, the Board will be asked to refer this claim to the Douglas County Risk Manager for review and determination. You will be notified in writing once the Board has referred your claim to the Risk Manager.

If you have any questions, please do not hesitate to contact me at (402) 444-6764.

Sincerely,

Ellen M. Sechser  
Administrative Assistant  
Douglas County Clerk's Office