

Form #11 CLAIM REJECTION FOLLOWING INSUFFICIENCY NOTICE

\* TO BE TYPED ON CITY LETTERHEAD

(SEND AFTER 15 DAYS FOLLOWING REJECTION NOTICE: GC §910.8)

TO: Name of claimant  
c/o claimant's attorney, or  
claimant's parents, if a minor

DATE: \_\_\_\_\_

Use address on claim indicating address to which notices are to be sent. If such an address is not indicated, use claimant's home address.

RE: Claim of (NAME OF ENTITY)

Dear Sir/Madam:

You were advised on (DATE OF INSUFFICIENCY LETTER) that the claim you presented to the (NAME OF ENTITY) on (DATE OF SUBMISSION) failed to substantially comply with the requirements of the California Government Code, Sections 910 and 910.2.

Without prejudicing our rights to defend the claim on the basis it was insufficiently filed, NOTICE IS HEREBY GIVEN that the claim for damages you presented to the (NAME OF ENTITY) on (DATE OF SUBMISSION) was rejected by the (GOVERNING BOARD) for the (NAME OF ENTITY) on (DATE REJECTED).

WARNING

Subject to certain exceptions, you have only six (6) months from the date 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 an attorney, you should do so immediately.

As allowed by California Code of Civil Procedure Sections 128.6 and 1038, the (NAME OF ENTITY) will seek to recover all incurred costs and attorney fees from you and your attorney should you ultimately serve the (NAME OF ENTITY) with a lawsuit and it is later determined the suit was not brought in good faith or on reasonable grounds. If you feel you must name the (NAME OF ENTITY) in the lawsuit to protect yourself, we urge you not to serve the (NAME OF ENTITY) with a summons and complaint until you are certain there is a justiciable controversy with the (NAME OF ENTITY).

Very truly yours:

(NAME OF ENTITY)  
(NAME OF PERSON AUTHORIZED  
TO SEND REJECTION NOTICES)

cc: ABAG PLAN

