



SANTA CLARA VALLEY WATER DISTRICT

NON-AGENDA

June 17, 2022

Board Policy EL-7 Communication and Support to the Board
The BAOs shall inform and support the Board in its work.

Page		<u>CEO BULLETIN & NEWSLETTERS</u>
		CEO Bulletin: None
		<u>BOARD MEMBER REQUESTS & INFORMATIONAL ITEMS</u>
4		BMR/IBMR Weekly Reports: 06/16/22
5		Memo from David Cahen, Risk Manager, to the Board of Directors, dated 06/14/22, regarding Risk Management Communication.
		<u>INCOMING BOARD CORRESPONDENCE</u>
12		Board Correspondence Weekly Report: 06/16/22
13		Email from Rea Freedom, to the Board of Directors, dated 06/08/22, regarding the Lexington Reservoir (C-22-0099).
16		Email from Bob March, to Director Kremen, dated 06/09/22, regarding NextDoor Post on Water Conservation (C-22-0100).
		<u>OUTGOING BOARD CORRESPONDENCE</u>
18		Email from Director Keegan, to Erik R, dated 06/08/22, regarding Valley Water Ballot Measure (C-22-0098).
20		Email from Director Kremen, to Rea Freedom, dated 06/08/22, regarding the Lexington Reservoir (C-22-0094).
22		Email from Director Hsueh, to David Kaufman, dated 06/14/22, regarding the Landscape Rebate Program (C-22-0097).

Board correspondence has been removed from the online posting of the Non-Agenda to protect personal contact information. Lengthy reports/attachments may also be removed due to file size limitations. Copies of board correspondence and/or reports/attachments are available by submitting a public records request to publicrecords@valleywater.org.

CEO BULLETIN

BOARD MEMBER REQUESTS and Informational Items

Report Name: Board Member Requests

Request	Request Date	Director	BAO/Chief	Staff	Description	20 Days Due Date	Expected Completion Date	Disposition
I-22-0004	06/14/22	Hsueh	Baker	Gin	Director Hsueh requests staff to prepare a follow up email to Mr. Burns (original Correspondence C-22-0081 in May) regarding AMI and smart metering, since SJ Water received approval to deploy AMI, one of Mr. Burns' concerns.	07/04/22		



MEMORANDUM

FC 14 (02-08-19)

TO: Board of Directors

FROM: David Cahen
Risk Manager

SUBJECT: Risk Management Communication

DATE: June 14, 2022

The purpose of this memorandum is to provide you a copy of recent Risk Management staff's communication with parties/individuals that have filed a claim against Valley Water.

Please find the following:

- 1) June 2, 2022 – Receipt of Claim to LA Downtown LA Group obo Felicia Saabedra

For additional information, please contact me at 408-630-2213.

DocuSigned by:

David Cahen

David Cahen
Risk Manager



Clean Water • Healthy Environment • Flood Protection

June 2, 2022

Farid Yaghoubtil
Downtown L.A. Law Group
601 N. Vermont Ave.
Los Angeles, CA 95127

Re: Receipt of Claim – L2120017

Mr. Yaghoubtil:

We are in receipt of the claim filed on behalf of your client, Felicia Saabedra.

We are currently investigating the claim and will notify you of our findings.

If you have any questions, please don't hesitate to contact me at (408) 630-2213 or at dcahen@valleywater.org

Sincerely,

DocuSigned by:

David Cahen

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David Cahen
Risk Manager





CLAIM AGAINST THE SANTA CLARA VALLEY WATER DISTRICT
California Government Code Sections 900 and following

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The completed form can be mailed, sent electronically or hand delivered. Mail or deliver to: Clerk of the Board Santa Clara Valley Water District-HQ 5700 Almaden Expressway San Jose, CA 95118 Or submit the completed form electronically to: clerkoftheboard@valleywater.org	Clerk of the Board's Date Stamp: 22 JUN 1 PM 3:30	
	For SCVWD Use Only	
	Date Received: 6/1/22	ROUTING
	<input checked="" type="checkbox"/> Via U.S. Mail:	<input checked="" type="checkbox"/> CEO:
	<input type="checkbox"/> Hand Delivered:	<input checked="" type="checkbox"/> District Counsel
<input type="checkbox"/> E-mail:	<input checked="" type="checkbox"/> Risk Management Org	
<input type="checkbox"/> Other:	<input checked="" type="checkbox"/> COB	
	<input type="checkbox"/> BOD (District #):	

With certain exceptions, claims for personal injury or property damage MUST be filed within six months of the incident giving rise to the claim. Claimant must complete each section. If information is unknown, write "unknown" in the appropriate box. Please use additional pages if necessary. Please attach itemized receipts, witness statements, photos and all other documentation that you believe will be helpful to process your claim. Claimant MUST sign and date the form; see last page.

Name of Claimant: Felicia Saabedra			
Address of Claimant: 2950 Story Rd.		City: San Jose	State: CA
Mailing Address to Which Notices Should be Sent if Different From Above: 601 N. Vermont Ave.		City: Los Angeles	State: CA
Home Phone Number:		Cell Phone Number: (669) 299-0533	Work Phone Number:
Is this claim being filed on behalf of a minor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If so, please indicate minor's date of birth: _____ Relationship to the minor: _____	
Date and time of incident or loss: 12/07/2021 At or around 2 am	Location of incident or loss (address): At or around 2048 N. Capitol Ave. San Jose, CA 95132		Is there a police report? <input type="checkbox"/> Yes If Yes, Police Report #: <input checked="" type="checkbox"/> No

Describe how the incident or loss happened, and the reason you believe the Santa Clara Valley Water District is responsible for your damages (Please attach additional sheets if necessary):

Ms. Saabedra was standing near her parked vehicle when she stepped into an opened manhole causing her sustain injury. Santa Clara Valley Water District failed to warn the general public of a dangerous situation.



CLAIM AGAINST THE SANTA CLARA VALLEY WATER DISTRICT
California Government Code Sections 900 and following

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In detail, describe the damage or injury (*Please attach additional sheets if necessary*):
Injuries include but are not limited to: right knee, right leg, hip and back.

List Name(s) and contact information of any witness(es) or District employee involved (if any):

Unknown

DAMAGES CLAIMED: Basis for computation of amounts claimed (include copies of bills, invoices, estimates, receipts, photos, police case # or other documentation.) Note: If your claim is more than \$10,000, you need not fill in an amount, but must state whether jurisdiction for the claim would be in the Limited Jurisdiction (up to \$25,000) or Unlimited jurisdiction of the Superior Court.

Is the amount of the claim under \$10,000?
Court Jurisdiction: (Check One)

☐ Yes

☐ Limited Civil

☒ No

☒ Unlimited Civil

ITEMS	CLAIM AMOUNT
1. Bodily injury and pain and suffering	\$ 1,000,000.00
2.	\$
3.	\$
4.	\$
TOTAL AMOUNT	\$ 1,000,000.00

WARNING: IT IS A CRIMINAL OFFENSE TO FILE A FALSE OR FRAUDULENT CLAIM (Penal Code Section 72 and 550)

I have read the matters and statements made in the above claim and I know the same to be true of my own knowledge, except to those matters stated upon information and belief and as to such matters I believe the same to be true. I certify under penalty of perjury that the foregoing is TRUE and CORRECT.

Signed this May day of 26, 20 22  OBO Felicia Saabedra
Claimant's signature

Government Code Section 945.6 provides that, with limited exceptions, any suit brought against a public entity must be commenced:

- (1) If written notice is given of a denial of claim in accordance with **Section 913**, not later than six months after the date such notice is personally delivered or deposited in the mail.
- (2) If written notice is not given of a denial of claim in accordance with **Section 913**, within two years from the accrual of the cause of action.



