Lee County Board of County Commissioners Agenda Item Summary

Blue Sheet No. 20040939

1. REQUESTED MOTION:

ACTION REQUESTED: Accept and execute *Release for Property Damage*, a 100% settlement offer from Progressive Insurance Company in the amount of \$2,528,54 for damages to Lee County property.

WHY ACTION IS NECESSARY: Board of County Commissioners' approval required for settlement offers and execution of *Release for Property Damage* are required to complete the transaction with Progressive Insurance Companies for their payment.

WHAT ACTION ACCOMPLISHES: Releases Progressive Insurance and Kevin Hall from any further liability to the County for a \$2,528.54 payment to County for damages to Lee County property, invoice 1661.

2. <u>DEPARTMENTA</u> COMMISSION D		RY:	716	∂A	3. MEETING	DATE: 08-	10-2004	
4. AGENDA: 5. REQUIREMENT/PURPOSE: (Specify)					6. REQUESTOR OF INFORMATION:			
CONSENT	` -	STATUTE			A. COMMISSI	IONER		
✓ ADMINISTRA	TIVE	ORDINANO	CE -		B. DEPARTM		County Attorney	
APPEALS		ADMIN. CO	ODE —		C. DIVISION		Seneral Services	
PUBLIC	V	OTHER	-5	Settlement	BY: -	751	\rightarrow	
WALK ON		Offer & Exe	cution of	f Release	1 -	Scott S. Co	overt,	
TIME REQUII	RED:				1	Assistant C	County Attorney	
7. BACKGROUND:	,							
insured by Progressive Property Damage be earned This would mean a sate Funds to be deposite ATTACHMENTS: Research Resea	executed before isfaction of 1 account blease for Prop	re payment is r 00% for Lee C : PD541091750 perty Damage (CNDATIONS:	made. County De 00.364420 (3 Origin	epartment of		equest that	the <i>Release jor</i>	
	D THE ELECTION	<u></u>						
Department Purc	B hasing or] itracts	C Human Resources	D Other	E County Attorney	F Budget S Uff 7		G County Manager	
	J/A	N/A	N/A		OA DM	- 1 0 0 0	10 1-18.04	
10. <u>COMMISSION</u>	ACTION:							
	DEN.	ERRED				COUNTY ADMIN	24 -7 567 KK	

RELEASE FOR PROPERTY DAMAGE

The **LEE COUNTY GOVERNMENT**, a political subdivision of the State of Florida, for the sole consideration of the payment of Two Thousand Five Hundred Twenty-Eight Dollars and Fifty Four Cents (\$2,528.54) from **PROGRESSIVE INSURANCE COMPANY**, hereby release and forever discharge Kevin Hall, its servants, successors, heirs, executors, administrators, assigns, from any and all claims, demands, or causes of action on suits of any kind in any way arising out of damages to property caused by an accident on June 13, 2004, at Summerlin Road in Fort Myers, Florida.

The undersigned hereby declares that the terms of this settlement have been completely read and are fully understood and voluntarily accepted for the purpose of making a full and final compromise adjustment and settlement of any and all claims, disputed or otherwise, on account of the damages above-mentioned, and for the express purpose of precluding forever any further or additional claims relating to property damage arising out of the aforesaid accident.

As consideration for payment of the above amount, LEE COUNTY GOVERNMENT, DEPARTMENT OF TRANSPORTATION shall not institute any legal proceedings against PROGRESSIVE INSURANCE COMPANY and KEVIN HALL for any claims connected with Claim Number 04-3158435, and forever discharges PROGRESSIVE INSURANCE COMPANY and KEVIN HALL from all claims, demands, damages and actions arising therefrom.

DATED this	day of	, 2004.	
ATTEST: CHARLIE		BOARD OF COUNTY COM OF LEE COUNTY, FLORID	
BY:		BY:	
Deputy (Clerk	Chairman	
		APPROVED AS TO FORM	:
		BY:	
		Office of the County	Attorney

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DATED this	day of	, 2004.
ATTEST: CHARLIE GREEN CLERK OF COURTS		RD OF COUNTY COMMISSIONERS EE COUNTY, FLORIDA
BY:	BY:	
Deputy Clerk		Chairman
	APPI	ROVED AS TO FORM:
	BY:	
		Office of the County Attorney

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BY:		BY:	
Deputy Cler	k	Chairman	
		APPROVED AS TO FORM:	
		BY:	
		Office of the County Attorney	

olicy # 1217691-002	insured HALL, KEVIN	and the second second	5 MONTHS AFTER DAT Date Issued 7/21/2004	Area Code	Draft Number 43524	12751 4
Claim # 43158435	Claimant LEE COUNTY TR	IANS	Date of Loss 6/19/2004	State Code	Office Issued At FLIFTMRU-BRN-	PAC
AY TWO THOUSAND F	IVE HUNDRED TWI	ENTY EIGHT AD	nD 54/100	Dollar	в <u>s</u> ******2,528	14 *** 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
In Payment Of PD - LIGHT POLST		es de la companya de	Affine and the contract of the		CDS 02PCL	
yable through Natio	nal City Bar	K	on seek of the one	PROGRESSIVE	AMERICAN INSURAN	CE COMPANY
ay Lee County D O 1500 MONROE'S FORT MYERS F	OT RECLAMATION TREET IL 33901	, ONL Y******				

#435242751# #041203895# 7701870#

VOID IF NOT PRESENTED WITHIN 6 MONTHS AFTER DATE OF ISSUE Policy # Draft Number Insured Date Issued Area Code 56-389 21217691-002 HALL, KEVIN 435242751 7/21/2004 679 412 Claim # Claimant Date of Loss Office Issued At State Code PAC 043158435 LEE COUNTY TRANS 6/13/2004 FL FL-FTMRU-BRN-\$*****2,528.54** Dollars

PAY TWO THOUSAND FIVE HUNDRED TWENTY EIGHT AND 54/100

In Payment Of	*				
· -			CDS		
PD - LIGHT POLST				02PCL	
12 BIOITI TOLOI			CODE	UZPCL	

PROGRESSIVE AMERICAN INSURANCE COMPANY

Pay LEE COUNTY DOT RECLAMATION, ONLY*****
1500 MONROE STREET
FORT MYERS FL 33901 To

> REP ID :LML0011 **ORG CODE:31261**