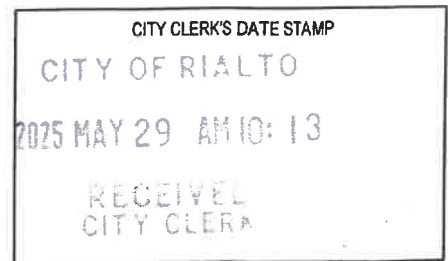




**CITY OF RIALTO  
LIABILITY  
CLAIM FOR DAMAGES  
TO PERSON OR PROPERTY**



1. Claims for death, injury to person, or to personal property must be filed not later than six (6) months after the occurrence (Gov. Code §911.2).
2. Claims for damages to real property must be filed not later than one (1) year after the occurrence (Gov. Code §911.2).
3. READ ENTIRE CLAIM FOR BEFORE FILING
4. ATTACH SEPARATE SHEETS, IF NECESSARY, TO GIVE FULL DETAILS

**RETURN TO:**

**Rialto City Clerk's Office**

Mail: 150 S. Palm Ave., Rialto, CA 92376

Address: 290 W. Rialto Ave., Rialto, CA 92376

**CLAIMANT INFORMATION:**

David Vance Rojas

FULL NAME

DATE OF BIRTH

11101 LAWRENCE STREET  
HOME ADDRESS INCLUDING CITY, STATE & ZIP

HOME TELEPHONE NO.

BUSINESS ADDRESS INCLUDING CITY, STATE & ZIP

BUSINESS TELEPHONE NO.

ADDRESS AT WHICH CLAIMANT DESIRES TO RECEIVE  
NOTICES OR COMMUNICATIONS REGARDING THIS CLAIM  
(if different from home address provided above):

1. WHEN DID DAMAGE OR INJURY OCCUR? DATE: June 6-2024 TIME: 10:00 ☒ AM ☐ PM

2. PLACE OF ACCIDENT (OCCURRENCE) BE SPECIFIC - Describe fully and (if applicable) locate on diagram on reverse side of this sheet.  
Where appropriate, give street names and addresses, measurements and landmarks.

Roadside Dr - FIVE 330

3. HOW DID DAMAGE OR INJURY OCCUR?

Bad Road Condition see  
Page 2

4. WERE POLICE AT THE SCENE? ☐ YES ☐ NO WERE PARAMEDICS AT THE SCENE? ☐ YES ☐ NO

5. WHAT PARTICULAR ACT OR OMISSION DO YOU CLAIM CAUSED THE INJURY OR DAMAGES? Give the name of the city/town employee causing the injury or damage, if known.

Vehicle

6. GIVE TOTAL AMOUNT OF CLAIM Include estimate of amount of any prospective injury or damage

\$ 536.81

HOW WAS THE ABOVE AMOUNT COMPUTED? Be specific, list doctor bills, repair estimates, etc. Please attach 2 estimates.

DAMAGES INCURRED TO DATE:

Item/Date: 2 - June 6, 2024

Amount: \$ 536.81

Item/Date: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

**TOTAL AMOUNT CLAIMED AS OF PRESENTATION OF THIS CLAIM:**

\$ 536.81

**ESTIMATED PROSPECTIVE DAMAGES, AS FAR AS KNOWN:**

Item/Date: 11-25-2024

Amount: \$ 536.81

Item/Date: 11-25-2024

Amount: \$ 1761.31

**TOTAL ESTIMATED AMOUNT PROSPECTIVE DAMAGES:**

\$ 2293.12

**7. WITNESSES TO DAMAGE OR INJURY** List all persons known to have information (attach additional pages, if necessary)

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

**8. IF INJURED, PROVIDE NAME, CONTACT INFORMATION AND DATE/TIME DOCTOR(S) OR HOSPITAL(S) VISITED:**

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ ☐ AM ☐ PM

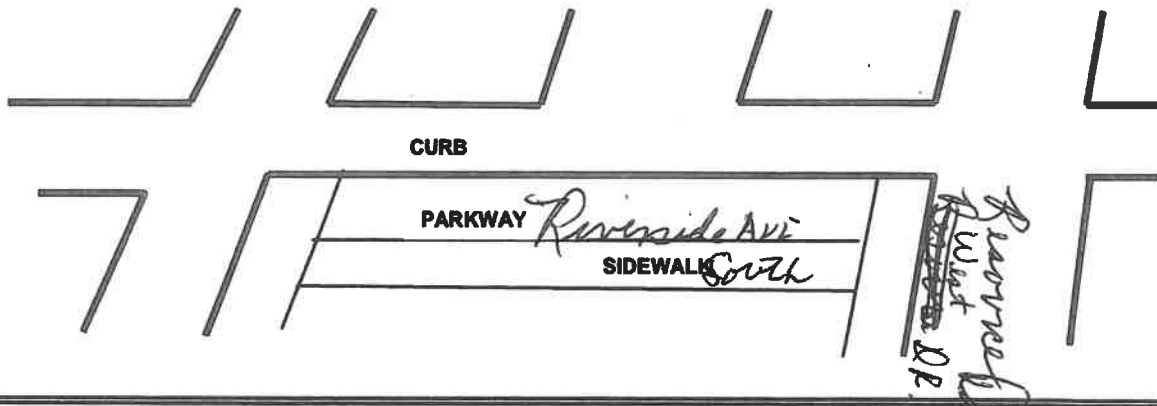
DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ ☐ AM ☐ PM

**9. PLEASE READ THE FOLLOWING CAREFULLY:**

For all vehicle accident claims, place on the following diagram, the names of streets, including NORTH, EAST, SOUTH AND WEST directions. Indicate place of accident by "X" and by showing house numbers or distances to street corners.

If a city/town vehicle was involved, designate by letter "A" location of the City/Town vehicle when you first saw it, and by "B" location of yourself or your vehicle when you first saw City/Town vehicle; location of City/Town vehicle at time of accident by "A-1" and location of yourself or your vehicle at the time of the accident by "B-1" and the point of impact by "X".

⇒ **NOTE: IF THE DIAGRAM BELOW DOES NOT FIT THE SITUATION, PLEASE ATTACH A PROPER DIAGRAM SIGNED BY THE CLAIMANT.**



I HAVE READ THE FOREGOING CLAIM AND KNOW THE CONTENTS THEREOF; AND CERTIFY THAT THE SAME IS TRUE OF MY OWN KNOWLEDGE EXCEPT AS TO THOSE MATTERS WHICH ARE HEREIN STATED UPON MY INFORMATION AND BELIEF; AND AS TO THOSE MATTERS I BELIEVE THEM TO BE TRUE.

☒ I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

SIGNATURE OF CLAIMANT OR AGENT

DAVID VANCE ROJAS

TYPE OR PRINT NAME

May 26, 2025  
DATE

RELATIONSHIP TO CLAIMANT

**NOTE: PRESENTATION OF A FALSE CLAIM IS A FELONY (CA PENAL CODE 72)  
RETURN CLAIM TO: RIALTO CITY CLERK'S OFFICE - 150 S. PALM AVE., RIALTO, CA 92376**



CITY OF RIALTO

2025 MAY 29 AM 10:12

RECEIVED  
CITY CLERK

March 31, 2025

David Rojas  
11424 Leatherleaf Rd.  
Fontana, CA 92337-1420

RE:    Our Client:            City of Rialto  
       Claim Number:        GHC0079507  
       Date of Loss:           June 6, 2024

Dear David Rojas,

George Hills is the liability claims administrator for the City of Rialto. It is our function to review claims on behalf of the city and provide recommendations regarding them.

After completing our review of the referenced incident, we have determined that your claim should be rejected, as the required burden of proof to establish fault against the city has not been met.

You will be receiving a formal rejection notice which will provide additional information regarding your claim.

If you have any questions, please contact the undersigned.

Kindest Regards,  
George Hills Company

Cynthia Lara  
Claims Representative  
Phone: (909) 632-4134  
Email: [cynthia.lara@georgehills.com](mailto:cynthia.lara@georgehills.com)

cc:     City of Rialto

A picture is  
Worth a Thousand  
Words.

Claim Number DHE0079507

CITY OF RIALTO  
705 MAY 29 AM 12  
RECEIVED  
CITY CLERK

①

May 25, 2025

Going on Riverside AV  
~~road~~ to Resource Dr.  
South

This is a picture to  
entry to 330 FedEx  
Parking lot. One black  
looking west









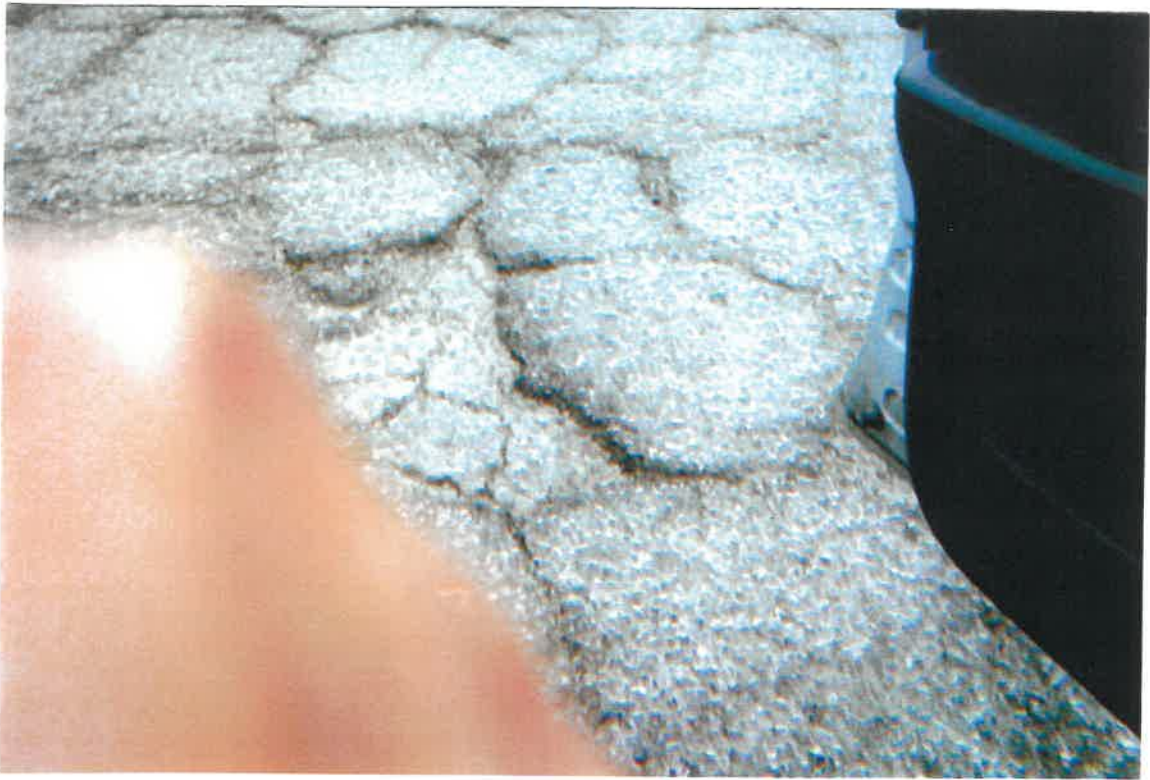


















PEP BOYS AUTO # 680  
16711 VALLEY BLVD.  
16711 VALLEY BLVD  
FONTANA, CA 92335  
(909) 823-7131  
BAR# ARD303408

EPA# CAL000082946

Service Manager: ANDY MEDRANO

If you have any questions  
or concerns, please call:  
(909) 823-7131

TRACKING ID# *	
Store ID #	Service Work Order #
0680	2251998

Insurance :  
Policy Number :

Name: DAVID ROJAS Address: City: State: Zip: Home Phone: Contact Phone:	Year: 2007 Make: TOYOTA Model: COROLLA Engine: 4-1794 1.8L 1ZZ-FE Vin No.: License No: Mileage: 75124 Color:	Date : 2024-06-06 Entered By: ANDY M Time In: 08:38:08 Date/Time Promised: 2024-06-06 11:53:20 Old Parts Returned: no  Customer Waiting
	Storage Charges: Any vehicle that is left unattended for more than 7 business days may be towed at the owner's expense. For more information, please see Store Manager.	

I HEREBY AUTHORIZE PEP BOYS TO PERFORM THE REPAIRS ON THIS WORK ORDER AND TO FURNISH THE NECESSARY MATERIALS AND ITS EMPLOYEES TO OPERATE THE VEHICLE FOR PURPOSES OF INSPECTION, TESTING AND DELIVERY. I UNDERSTAND THAT ANY COST QUOTED IS AN ESTIMATE. I UNDERSTAND THAT UNLESS DIRECTLY CAUSED BY PEP BOYS, IT IS NOT RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE VEHICLE OR ITS CONTENTS. THAT THE VEHICLE MAY BE PARKED IN THE PEP BOYS' PARKING LOT AND THAT VEHICLES ARE LEFT OVERNIGHT AT OWNER'S RISK.

*[Signature]*  
X

Initial Estimate	Parts \$:	Labor \$:	Total \$:	Date and Time:
	317.28	194.69	536.81	2024-06-06 08:38:08

I acknowledge notice and oral approval of an increase in the original estimated price

(signature or initials)

TYPE	PART	DESCRIPTION	CODE	MECHANIC	HRLY RATE	HRS	QTY	SOURCE	EACH	TOTAL
PK	0068510	FRONT ROTOR(S) PKG								
LB		FRONT ROTOR/DRUMS WITH BRAKE SERVICE	N	ERIC H			2		0.00	0.00
PN	31270G	F DISC BRAKE ROTOR	N				2		140.99	281.98
		LIMITED TWO YEAR WARRANTY								
Package SubTotal : 281.98										
PK	0635105	FRONT BRAKES PREMIUM PKG								
		Labor Warranty 24 Mo/24K Miles								
LB		FRONT BRAKES LABOR	N	ERIC H			1		175.00	143.75
		POSTTENDER							-31.25	
PN	PSG923	F DISC PADS	N				1		34.99	28.74
		POSTTENDER							-6.25	
		LIMITED LIFETIME WARRANTY								
LB		BRAKE FLUID CHANGE LABOR	N	ERIC H			1		62.01	50.94
		POSTTENDER							-11.07	
PN	00120	MAG1 DOT3 BRAKE FLUID 32OZ	N				1		7.99	6.56
		POSTTENDER							-1.42	
Package SubTotal : 229.99										
SF	2688	ENVIRONMENTAL HAZARDOUS WASTE FEE	N				1		0.25	0.25
LB		COMPLIMENTARY VEHICLE INSPECTION	N	ERIC H			1		0.00	0.00
LB		BRAKE SYSTEM INSPECTION	N	ERIC H			1		0.00	0.00

Parts: 317.28 Labor : 194.69 Other : 0.25 Tax : 24.59 Total : 536.81

Tender Date : 06/06/2024  
POS Trans # : 126794  
Tender Register: 105  
Tender Cashier: 492624

Tender Time : 11:57 AM  
Store : 0680  
Tender Till #: 105



NEED A TOW? CALL 1-800-PEP-BOYS or  
1-800-737-2697

