

26 OCT 14 PM 2:07

FILED
THE CLERK OF THE
COUNTY OF KERN
BY

CLAIM AGAINST THE COUNTY OF KERN

(Government Code §§ 910, 910.2 & 910.4)

This claim must be filed with the Clerk of the Board of Supervisors, 1115 Truxtun Ave., 5th Floor, Bakersfield, California 93301. If it is a claim for death, injury to person, injury to personal property or injury to growing crops, it must be filed within six months after the accident or event giving rise to the claim. If it is a claim for any other cause of action, it must be filed within one year after the event(s) giving rise to the claim. You must complete both sides and sign the claim form for the claim to be valid. Complete information must be provided. If the space provided is inadequate, please use additional paper and identify information by paragraph number. Do not attach medical records or other confidential records to your claim. ANY COMPLETED CLAIM AND ALL ATTACHMENTS WILL BE TREATED AS A PUBLIC RECORD AND WILL BE AVAILABLE FOR VIEWING BY THE PUBLIC ON THE COUNTY'S WEB SITE.

1. State the name and mailing address of claimant:

JONATHAN FLIPPEN, 14002 TABLE ROCK AVE, BAKERSFIELD
CA, 93314

2. State the mailing address to which claimant desires notices from the County to be sent:

14002 TABLE ROCK AVE, BAKERSFIELD, CA, 93314

3. State the date, place and other circumstances of the accident or event(s) giving rise to the claim.

10/6/2026, ROSEDALE HWY AT THE CORNER OF
JENKINS HEADING WEST, HIT POT HOLE

4. Provide a general description of the injury, damage or loss incurred so far as it may be known:

WHILE TURNING WEST ONTO ROSEDALE HWY, I HITA
POT HOLE, CAUSING DAMAGE TO LEFT FRONT SIDE
WALL OF MY TIRE. CAUSING THE TIRE TO GO FLAT

5. Provide the name or names of the public employee or employees causing the injury, damage or loss, if known:

KERN COUNTY ROADS

6. Regarding the amount claimed (including estimated amount of any prospective injury, damage or loss known as of the time the claim is filed):

If less than ten thousand dollars (\$10,000), state the amount: \$ 367.07.

If more than ten thousand dollars, would the claim be a limited civil case (less than \$25,000)? (Circle one)

Yes

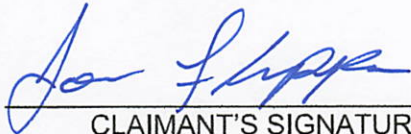
No

7. Please state any additional information which may be helpful in considering this claim:

POT HOLE WAS MARKED OUT. WHEN SPEAKING TO CITY ROADS
THEY INFORMED ME THAT IT WAS A COUNTY PERMITTED SOB.
AND THEY WERE SPOT CHECKING FOR LINES UNDER GROUND.
POT HOLE WAS NOT BACK FILLED PROPERLY

Claimant must date and sign below.

Signed this 14 day of 10, 20 26.



CLAIMANT'S SIGNATURE

BY ORDER OF THE BD/SUPV

Referred To

County Counsel
Logs

Copies Furnished

Risk Management
Hand delivered

Date 10-14-26

Clerk of the Board of Supervisors

By [Signature], Deputy

**WARNING! IT IS A CRIMINAL OFFENSE
TO FILE A FALSE CLAIM (Penal Code §72)**