NOTICE OF TORT CLAIMS

General Information

A. Claimant: Deborah A. Plaia

Address:

50 Bancroft Lane
Street Address

Mailing address if other than street address

Hainesport, NJ 08036
City State, Zip Code

Social Security Number

B. 1. If notices and correspondence in connection with this claim are to be sent to a person other than claimant, at the above mailing address, complete item #2.

Deborah A. Plaia
50 Bancroft Lane
Hainesport, NJ 08036

2. Relationship to claimant:

Explain Relationship

C. State fully, specifically and in detail the date, place and other circumstances of the occurrence or transaction which gave rise to the claim asserted:

1. Date: April 11, 2024 Time: _____

2. Place: 50 Bancroft Lane, Hainesport, NJ

at or near (Intersecting street or utility pole number or other identification to pin point precise location)

Municipality: Hainesport County: Burlington

3. Circumstances: (Set out here in full a narrative description in detail of all of the circumstances of the accident, occurrence or transaction on which you base your claim. Be precise, giving dates, times, names and addresses and official capacity of all involved; license number of vehicles; direction of travel; detailed description or copies of written documents or letters involved in the claim and if copies are not attached, where they can be examined, so far as pertinent. If a diagram will help draw one on the back of this page.

Claimant is a resident of Hainesport Township. Accordingly, claimant is afforded all rights available to all residents of the State of New Jersey, including but not limited to the Open Public Meeting Act, the Municipal Land Use Laws and the New Jersey Civil Rights Act.

On April 9, 2024, Hainesport Township Committee conducted a township meeting. A Resolution related to an application made by R&M Development was on the Agenda. R&M is

seeking approval to install a stormwater pipe on property owned by Hainesport Township. Claimant exercised her right to appear, make public comment and enter as an exhibit certain documents. During Public Comment, claimant cited the minutes to a meeting conducted by the township committee on July 12, 2022 referencing comments made by the former Mayor Bruce MacLachlan regarding who is going to maintain the pipe with an inadequate response from the engineer of R&M Development claimant expressed her concern with the grant of any easement on public lands to R&M. Claimant also cited to Shark River Cleanup Coalition v. Twp of Wall, 47 F.4th 126 (3rd Cir. 2022) when expressing her concerns. At the conclusion of claimant's comments, Township Committeewoman Anna Evans expressed concerns and indicated that she wanted to table the Resolution for further discussions. Committeeman Ken Montgomery joined in Ms. Evans concerns and motion to table. Committeewoman Tordy was conflicted but ultimately voted in favor of the Resolution. Mayor Gilmore and Committeeman Clauss had no concerns and voted in favor of the Resolution.

On April 10, 2024, claimant received a letter from attorney David Frank, Esq., counsel for R&M Development by emnail. David Frank, Esq. is also the mayor of a local town, Springfield Twp. In his letter, Mr. Frank advised that the day before he was informed (presumably by a member of the Hainesport Township Committee) that I had appeared at the township meeting and raised objections to the Resolution. Mr. Frank raised a convoluted argument about my being a member of the Creekview HOA which had previously objected to a different design of the retention pond, claimed that I, individually, was bound by a Settlement Agreement to which I am not a party and threatened to file a motion and/or lawsuit based on breach of contract (for a settlement agreement to which I am not a party) and/or other tort theories if claimant did not withdraw her objection to the Resolution.

Claimant responded that she is a resident of Hainesport Township and has certain rights afforded to her under all of the laws of the State of New Jersey. Claimant further informed Mr. Frank that she has the right to appear at township committee and participate in Public Comment. She also informed Mr. Frank that any motion to enforce is frivolous and a violation of her civil rights. Claimant also referred Mr. Frank to caselaw interpreting SLAPP suits, i.e. Strategic Lawsuits Against Public Participation. She also informed Mr. Frank that two members of the committee wanted to table the Resolution for further discussion, but Mayor Gilmore and Committeeman Clauss chose not to.

Claimant has the right to public participation. The Township was aware of R&M's involvement and that it was represented by David Frank, Esq. The Township was also aware of claimant's intent to file an objection as claimant delivered to the municipal building a letter and packet of documents stating her objections. The obligation to adjourn the Resolution and inform David Frank, Esq. of the objection rests with the Township, not with Claimant. Should David Frank, Esq. file, on behalf of R&M any lawsuit making frivolous allegations of breach of contract or raising any other frivolous theory of liability, claimant will join Hainesport Township as a third party defendant for its failure to adjourn the Resolution when it knew of R&M's involvement, the representation of David Frank, Esq. and that 2 members wanted to table the Resolution.

(b) Full copies of all appraisals and estimates of property damage claimed by you

(c) Copies of all written reports of all expert witnesses and treating physicians.

TO BE SUPPLIED

(d) A letter from your employer verifying your lost wages. If self-employed, a statement showing the calculation of your claimed lost income.

NOT APPLICABLE

(e) Copies of any pertinent contracts, resolution, letters or other written documents or publications on which your claim is based.

TO BE SUPPLIED

D. General description of the injury, damage or loss incurred so far as may be known at the time you present this claim:

TO BE DETERMINED

E. The name or names of the public entity, officer, employee or employees causing the injury, damages or loss, if known and if not known, such information as may serve to identify them:

Mayor Leila Gilmore
Committeeman Gerry Clauss

F. (1) The amount claimed as of the date you filed this claim.

TO BE DETERMINED

(2) The basis on which you compute this amount:

TO BE SUPPLIED.

G. (1) The nature and estimated amount of any prospective injury, damage, or loss, insofar as you know at the date you filed this claim.

TO BE DETERMINED

(2) The basis on which you compute this amount:

TO BE SUPPLIED

H. If you claim any other public entity officer or employee of such an entity or any other corporation, firm, officer, employee or person contributed to, or is also responsible for your damage give their names, addresses and a statement of how they contributed to the damage.

Hainesport Township Committee

ADDITIONAL SPECIFIC INFORMATION

1. State the name and address of the public entity that you claim caused your damage

Hainesport Township Committee

2. State the names of the employees or officers of the public entity who you claim were at fault, including any information that will assist in identifying and locating them.

Mayor Leila Gilmore
Committeeman Gerry Clauss

3. State the negligence or wrongful acts of the public entity and its officers and employees which caused your damages.

Failure to adjourn the Township Committee meeting when it knew of the involvement of R&M Development and that it was represented by counsel.

Failure to table the Resolution when requested by 2 members of the Township Committee

4. State the name and address of all witnesses to the accident, occurrence or transaction.

Mayor Leila Gilmore
Committeeman Gerry Clauss
Committeewoman Anna Evans
Committeeman Ken Montgomery
Committeewoman Karen Tordy
Solicitor John Gillespie, Esq.

Numerous residents of Hainesport Township

5. State the names of all police officers and police departments who investigated the accident.

6a. Claim for Damages (check appropriate block)

( ) Personal Injury ( ) Property Damage

(XX) Other – Explain in detail.

Negligence; 42 U.S.C. 1983 and New Jersey Civil Rights Act, N.J.S.A. 10:6-1 et seq., violations of New Jersey's Anti-Slapp Suit statutes, Violations of New Jersey's Open Public Meeting Act and Municipal Land Use Laws.

b. If you claim personal injury

(1) Describe your injuries resulting from this accident or occurrence

Injuries are to plaintiff's civil rights.

(2) Do you claim permanent disability resulting from this injury?

( ) Yes ( ) No

If yes, describe the injuries believed to be permanent.

(3) For each hospital, doctor or other practitioner rendering treatment, examination or diagnostic service, state:

Name of hospital, Doctor or other Facility	Address	Dates of treatment or services	Amount of Charges to Date	Amount or payment by other sources

(4) If you claim loss of wages or income as a result of the injuries, state:

Name of Employer	Address of Employer
Your Occupation	Date you became employed at this job
Rate of Pay	Dates of Absences
Total lost wages to date	If still out of work, expected date of return

NOTE: If you claimed loss of income arises from self-employed or other than wages, attach a calculation showing the basis of your calculation of lost income.

(5) Set forth any and all other losses or damages claimed by you.

TO BE DETERMINED.

7. If you claim property damage:

(a) Describe the property damaged.

(b) The present location and time when the property may be inspected.

(c) Date property acquired:

(d) Cost of the property:

(e) Value of property at time of accident:

(f) Description of damage

(g) Has the damage been repaired? No.
If so, by whom, when and cost of Repairs.

NJ DEP has not permitted claimant to perform the needed repairs

(h) Attach each estimate of repair costs to this form.

Unavailable at this time.

(i) Set forth in detail the loss claimed by you for property damage

8. Set forth in detail all other items of loss or damages claimed by you and the method by which you made the calculation.

9. The amount of the claim.

10a. Have you made a claim against anyone else for any of the losses or expenses claimed in this notice?

10b. If yes, set forth the names and addresses of all persons and insurance companies against whom you have made such claims.

11. Are any of the losses or expenses claimed herein covered by any policies of insurance? ____ For each such policy, state the name and address of the insurance company, policy number and benefits paid or payable. _____

12. Have you received or agreed to receive any money from anyone for the damages claimed herein? ____ If so, set forth the details of such agreement. _____

13. The following items must be submitted with this notice: Copies of all itemized bills for each medical expenses and other loss and expenses claimed.

I, hereby certify that the foregoing statements made by me are true, that the attached statements, bills, reports and documents are the only ones known to me to be in existence at this time. I am aware that if any of the statements made herein are willfully false or fraudulent, that I am subject to punishment provided by law.

Dated: 4/12/24

Claimant or person filing claim on behalf of claimant

TO WHOM IT MAY CONCERN:

I hereby authorize any and all doctors, hospitals, or other medical service facilities to release to the (name of public entity) _____ any and all records, reports, and other information concerning the treatment of the claimant named herein.

Dated: _____

Signature

(This must be signed by the claimant or the parents of claimants who are minors)