

★ **Roll Call Number**

Agenda Item Number

26

Date December 4, 2006

WHEREAS, Ronald Sowden, a sewer cleaning equipment operator in the Public Works Department, injured his left shoulder in the course of employment on May 12, 2003; and

WHEREAS, the City has previously paid 12.571 weeks of industrial disability payments based upon a permanent impairment rating previously obtained; and

WHEREAS, Mr. Sowden, through his attorney, is willing to settle his workers' compensation claim by agreement for settlement with payment of 62.5 additional payments at a weekly rate of \$511.36, plus accrued interest of \$5,336.05, all in lump sum; and

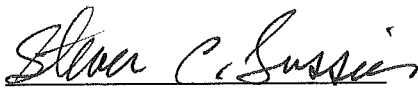
WHEREAS, it is the opinion of the Legal Department that this settlement, representing approximately a 15% industrial disability, is in the best interests of the City of Des Moines; NOW, THEREFORE,

BE IT RESOLVED by the City Council of the City of Des Moines, Iowa:

That payment in the amount of \$37,296.05 in lump sum to Ronald Sowden be and is hereby approved, subject to approval of an agreement for settlement by the Workers' Compensation Commissioner, and the Finance Director is authorized to draw warrants accordingly.

MOVED BY _____ TO ADOPT

FORM APPROVED:



Steven C. Lussier
Assistant City Attorney

| COUNCIL ACTION | YEAS | NAYS | PASS | ABSENT |
|----------------|------|------|----------|--------|
| COWNIE | | | | |
| COLEMAN | | | | |
| HENSLEY | | | | |
| KIERNAN | | | | |
| MAHAFFEY | | | | |
| VLASSIS | | | | |
| TOTAL | | | | |
| MOTION CARRIED | | | APPROVED | |

CERTIFICATE

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

_____ Mayor

_____ City Clerk