

Arkansas State Claims Commission

SEP 18 2018

RECEIVED

Please Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION Of the State of Arkansas

Mr. [X] Mrs. [] Ms. [] Miss [] DERRICK BERNARD PERKINS, Claimant

vs. State of Arkansas, Respondent

Do Not Write in These Spaces. Claim No., Date Filed (Month, Day, Year), Amount of Claim \$, Fund.

COMPLAINT

Derrick Bernard Perkins, the above named Claimant, of 612 Laughingrun, Forrest City, AR 72335... County of St. Francis represented by Jim Jackson... of Jackson Law Firm; 700 W. Broadway Street, Suite 2, North Little Rock, AR 72114... State agency involved: Arkansas Department of Transportation Amount sought: \$82,500

Month, day, year and place of incident or service: July 30, 2018 - Ark. Hwy 42 in rural Cross County at 3:30 p.m. Explanation: I am the owner operator of Perkins & Perk Trucking. I transport grain to feed mills in the delta for a living. On the date of the accident, I was transporting a load of grain east bound on Ark. Highway 42. Another grain truck was ahead of me. I observed the grain truck pass the two tractors that were also traveling east on Hwy 42. The two tractors are grass mowing tractors by the highway department to mow grass along the roadway. They appeared to be finished mowing for the day and driving back to their local maintenance yard.

As I approached the two tractors, I moved into the west bound lane to safely pass both of them. They were part on the shoulder and part on the highway. For some reason, one of the tractors turned into west bound lane. There was no way I could avoid hitting the tractor. I tried to maintain control of my truck after impact but I could not do so. My truck turned onto its side and ended up in a ditch. I could smell fuel and was afraid of a fire. I escaped from the cab of the truck. My head was hurt during the wreck so I do not recall a lot about the wreck or what happened afterwards. I was transported by AirEvac to the Regional One Medical Center in Memphis. AirEvac has charged me \$40,723.39. I am still waiting on the bill from the hospital. I am being treated for physical therapy at the Pain Center in West Memphis. My 1995 White GMC Semi with a volvo engine was totalled in the wreck. It cost approximately \$8,000. I have been unable to work since the wreck. I was earning \$1,500 to \$2,000 per week. The grain season is my busy time of the year and I don't know how I will make up this loss of income and loss of ability to earn money. I know the driver of the tractor was also air-lifted to Memphis. I hope he is doing well. Perkins & Perk Trucking is out of business without a truck.

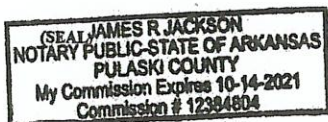
As parts of this complaint, the claimant makes the statements, and answers the following questions, as indicated: (1) Has claim been presented to any state department or officer thereof? No; when?; to whom?; and that the following action was taken thereon:

and that \$ was paid thereon: (2) Has any third person or corporation an interest in this claim? Yes; if so, state name and address Hallmark Insurance Companies, 6500 Pinecrest Drive; Plano, Texas 75024 and that the nature thereof is as follows: Property Damage claim #183171TG - Hallmark has an interest in the property damage. I have a \$1,000 Deductible. and was acquired on, in the following manner:

THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verily believes that they are true. DERRICK PERKINS (Print Claimant/Representative Name) Derrick B. Perkins (Signature of Claimant/Representative)

SWORN TO and subscribed before me at Forrest City, Arkansas

on this 4th day of September, 2018. James R. Jackson (Notary Public)



SFI- R7/99

My Commission Expires: October 14, 2021 (Month, Day, Year)

ARKANSAS STATE CLAIMS COMMISSION
MOTOR VEHICLE ACCIDENT REPORT FORM

SEP 18 2018

SECTION I
CLAIMANT Derrick Bernard Perkins **ADDRESS** 612 Leighton Drive
CITY & STATE Forrest City, Arkansas **ZIP CODE** 72335
DATE OF ACCIDENT: July 30, 2018 **TIME:** 3:30 p.m.
MOTOR VEHICLE DAMAGED: **TYPE** Semi Truck **MAKE** G.M.C. **YEAR** 1995
DRIVEN BY: Derrick Bernard Perkins **ADDRESS** See above

Give a brief description of accident, showing how accident happened, exact loss and extent of damage to car.

I was transporting a load of grain to a mill on Hwy 42 eastbound. I saw two Tractors traveling slowly eastbound in the shoulder and partially on the lane of traffic. I moved into the west bound lane to pass the two tractors. For some reason, one of the tractors drove into the path of my semi which caused a collision. The impact caused me to lose control of my semi which then crashed into a ditch and turn over.

SECTION II
Has this vehicle been repaired? Yes () No (X) If repairs have been made, give the following information: Amount \$ _____ Have you paid for the repairs? Yes () No () NOTE: Attach a copy of repair bill.

If repairs have not been made, list three estimates below and attach copies of each of them.

NAME	ADDRESS	AMOUNT
1. <u>Semi is totalled.</u>	_____	\$ _____
2. _____	_____	_____
3. _____	_____	_____

SECTION III
Was vehicle covered by Insurance? Yes (X) No () Liability Only ()
Comprehensive: Yes (X) No () What is your deductible? \$ 1,000.00
Collision: Yes () No () What is your deductible? \$ _____

NAME OF INSURANCE CARRIER Hallmark Insurance; 6500 Pinecrest Drive; Plano, Texas 75024
ADDRESS _____

SECTION IV
Type of State Vehicle Involved Kubota Tractor used to mow grass - License No. NA
Driver David Timothy McMasters Property of which State Agency Ark. Department of Transportation
If accident was investigated by the State Police, give name of investigating officer: Trooper Jason D. Murphy, Report 190718022P If investigation was made by some other agency, give name and title of officer making the investigation: _____

SECTION V
The undersigned states on oath that he/she is familiar with the matters and things set forth in the above statement, and that he/she verily believes that they are true.

Derrick Perkins
Signature of Claimant - Derrick Perkins



Sworn to and subscribed before me at Forrest City, Arkansas
City, State
on this 28 day of AUGUST, 2018
day month year

My Commission Expires 10/14/2021

James R. Jackson
Notary Public

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

DERRICK BERNARD PERKINS

CLAIMANT

V.

CLAIM NO. 190373

**ARKANSAS STATE HIGHWAY COMMISSION
AND ARKANSAS DEPARTMENT OF TRANSPORTATION**

RESPONDENTS

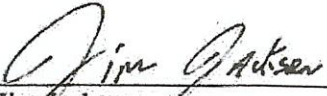
FULL AND COMPLETE SETTLEMENT AND RELEASE

For the sole consideration of One Hundred Thirty Thousand Dollars and zero cents (\$130,000.00) the undersigned, Derrick Bernard Perkins, does hereby release, discharge and forever acquit, Arkansas Department of Transportation, Arkansas State Highway Commission (collectively ArDOT), their agents, employees, successors, and assigns liable or who might be liable in any way or in any manner as result of an accident which occurred on or about July 30, 2018, in Cross County, Arkansas. This release shall operate as a full and final discharge of all causes of action in tort or in contract, or of any kind, of the undersigned, presently existing and which may arise in the future, of whatever kind and whatever nature against ArDOT.

It is further expressly agreed by the undersigned that the amount to be paid herein is in full and final satisfaction of any and all claims including, but not limited to, any claim for bad faith, personal injury, wrongful death, damage to property, loss of consortium, and for any and all damages, known or unknown, or demands against ArDOT which may arise out of said accident.

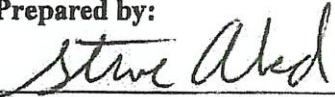
The undersigned hereby accepts ArDOT's unconditional promise not to dispute liability for said claim filed by the undersigned before the Arkansas State Claims Commission as full and complete consideration as described above. It is understood that tender of payment by warrant will be made payable to the undersigned, Derrick Bernard Perkins and his attorney, Jim Jackson in the amount of One Hundred Thirty Thousand Dollars and zero cents (\$130,000.00), which has

Witnessed and approved by:



Jim Jackson
Attorney for Claimant

Prepared by:



Steven W. Abed
Staff Attorney
Arkansas Department of
Transportation

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

DERRICK BERNARD PERKINS

CLAIMANT

V.

CLAIM NO. 190373

**ARKANSAS STATE HIGHWAY
COMMISSION; ARKANSAS
DEPARTMENT OF TRANSPORTATION**

RESPONDENT

ORDER

Now before the Arkansas State Claims Commission (the "Claims Commission") is the Full and Complete Settlement and Release (the "Settlement Agreement") signed by Derrick Bernard Perkins (the "Claimant"), Claimant's attorney, and counsel for the Arkansas State Highway Commission and the Arkansas Department of Transportation.

Based upon a review of the pleadings and the Settlement Agreement, the Claims Commission hereby APPROVES the Settlement Agreement, allows this claim in the amount of \$130,000.00, and refers this claim to the General Assembly for review and placement on an appropriations bill pursuant to Ark. Code Ann. § 19-10-215(b).

IT IS SO ORDERED.

Henry C. Kinslow

ARKANSAS STATE CLAIMS COMMISSION

Dexter Booth
Henry Kinslow, Co-Chair
Bill Lancaster
Sylvester Smith
Mica Strother, Co-Chair

DATE: January 24, 2019

Notice(s) which may apply to your claim

- (1) A party has forty (40) days from the date of this Order to file a Motion for Reconsideration or a Notice of Appeal with the Claims Commission. Ark. Code Ann. § 19-10-211(b). If a Motion for Reconsideration is denied, that party then has twenty (20) days from the date of the denial of the Motion for Reconsideration to file a Notice of Appeal with the Claims Commission. Ark. Code Ann. § 19-10-211(b)(3). A decision of the Claims Commission may only be appealed to the General Assembly. Ark. Code Ann. § 19-10-211(a).
- (2) If a Claimant is awarded less than \$15,000.00 by the Claims Commission at hearing, that claim is held forty (40) days from the date of disposition before payment will be processed. *See* Ark. Code Ann. § 19-10-211(b). Note: This does not apply to agency admissions of liability and negotiated settlement agreements.
- (3) Awards or negotiated settlement agreements of \$15,000.00 or more are referred to the General Assembly for approval and authorization to pay. Ark. Code Ann. § 19-10-215(b).