

990262



MEMORANDUM

Office of the City Attorney

Phone: 334-5011/Fax 334-2229
Box 46

TO: Mayor and City Commissioners

FROM: Marion J. Radson, City Attorney

SUBJECT: **Norris, Carl E. v. The City of Gainesville**
EEOC Complaint
Charge Number 150993366


DATE: July 26, 1999

CONSENT ITEM


Recommendation: The City Commission authorize the City Attorney and/or Special Counsel, if insurance coverage is available, to represent the City of Gainesville in the case styled Carl E. Norris v. City of Gainesville, a Municipal Corporation. Charge Number 150993366.

On July 9, 1999 the City of Gainesville received, via U.S. Mail, a complaint filed with the EEOC by Carl E. Norris. Mr. Norris alleges that the City discriminated against him based on his race and disability.

Prepared by:


Elizabeth A. Waratuke
Litigation Attorney

Approved
and Submitted by:


Marion J. Radson
City Attorney

EAW/mec

CHARGE OF DISCRIMINATION

AGENCY

CHARGE NUMBER

FEPA
 EEOC

150 993366

This form is affected by the Privacy Act of 1974; See Privacy Act Statement before completing this form.

Florida Comm. on Human Relations and EEOC
State or local Agency, if any

NAME (Indicate Mr., Ms., Mrs.)

HOME TELEPHONE (Include Area Code)

Mr. Carl E. Norris

(352) 338-8222

STREET ADDRESS

CITY, STATE AND ZIP CODE

DATE OF BIRTH

P.O. Box 152, Brooker, FL 32622

09/20/1956

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)

NAME

NUMBER OF EMPLOYEES, MEMBERS

TELEPHONE (Include Area Code)

Gainesville Regional Utilities

Cat B (101-200)

(352) 334-2669

STREET ADDRESS

CITY, STATE AND ZIP CODE

COUNTY

P.O. Box 490, Gainesville, FL 32609

001

NAME

TELEPHONE NUMBER (Include Area Code)

STREET ADDRESS

CITY, STATE AND ZIP CODE

COUNTY

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))

DATE DISCRIMINATION TOOK PLACE
EARLIEST LATEST

RACE COLOR SEX RELIGION NATIONAL ORIGIN
 RETALIATION AGE DISABILITY OTHER (Specify)

03/29/1999 03/29/1999

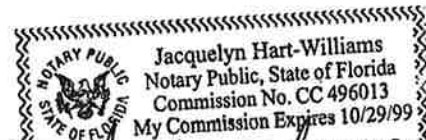
CONTINUING ACTION

THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s)):

I. I am a 42 year old Black male with a disability. The Respondent refused to provide me with a reasonable accommodation. As a result, I was forced into early retirement on 03/29/99 while I was on medical leave.

II. I worked for the Respondant for 21 years with a disability. I was not accommodated with my disability while the Respondant accommodated White employees with disabilities. On March 29, 1999 I was forced into early retirement.

III. The Respondent discriminated against me because of my Race and disability in violation of Title VII of the 1964 Civil Right Act, as amended and Title I of the Americans with Disabilities Act.



I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.

NOTARY - (When Made a Notary Public, Florida Notary Service & Bonding Co.)

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

I declare under penalty of perjury that the foregoing is true and correct.

SIGNATURE OF COMPLAINANT,

Carl E. Norris

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (Day, month, and year)

Date 07/04/99 *Carl E. Norris*
Charging Party (Signature)