

UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
612 EAST LAMAR BLVD, SUITE 400
ARLINGTON, TEXAS 76011-4125

June 27, 2011

Lorri Henderson
lhenderson@hertz.com
Hertz Claim Management Corporation
PO Box 612127
DFW Airport, TX 75261

Re: Letter to Leonard Willoughby from Hertz Claim Management Corporation, dated 6/3/2011

Dear Lorri Henderson:

Mr. Leonard Willoughby, a U.S. Federal Government employee, brought to my attention the above referenced letter, which he received on June 11, 2011, concerning damage (a loss) to the Hertz rental vehicle he was using while conducting official US Government business while in the Arlington, Texas area.

The letter requests evidence that the vehicle involved in the loss was a business rental and provided examples that would satisfy this requirement. One example was a letter/e-mail from a supervisor stating that the vehicle was rented for business purposes, in whole or part. As Mr. Willoughby's supervisor, he was authorized in whole to rent the Hertz vehicle, from May 23 to May 27, 2011 for business purposes while in the Arlington, Texas area.

The letter implies that the loss was due to an accident on May 24, 2011. Mr. Willoughby, however, was never in an accident but was caught in a hail storm from a tornado near I-30 and Highway 360. The attached incident report he filled out, at the request of Hertz, indicates the cause of damage was hail, an Act of Nature and not an accident.

If you have any further questions, please contact me at 817-860-8141 or via e-mail at Geoffrey.Miller@nrc.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "G. Miller", is written over the typed name.

Geoffrey Miller, Chief
Project Branch B
Division of Reactor Projects
Region IV
U.S. Nuclear Regulatory Commission

Enclosure: Vehicle Incident Report, dated 05/27/2011
CC:

G.R. Mobaraki, Ph.D.
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rmobaraki@hertz.com

Lori Leffler
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Robin Baum, Deputy and Special Counsel, OGC (Robin.Baum@nrc.gov)
Branch Chief, DRP/B (Geoffrey.Miller@nrc.gov)
Senior Project Engineer, DRP/B (Leonard.Willoughby@nrc.gov)
Regional Counsel (Karla.Fuller@nrc.gov)

Letter with Enclosure:

File located: S:_DRP\20110615 Ltr to Hertz – Damage to Rental Car from Hail.docx

SUNSI Rev Compl.	X Yes <input type="checkbox"/> No	ADAMS	X Yes <input type="checkbox"/> No	Reviewer Initials	GBM
Publicly Avail	X Yes <input type="checkbox"/> No	Sensitive	<input type="checkbox"/> Yes X No	Sens. Type Initials	GBM
SPE:DRP/B	RIV:RC	C:DRP/PBB			
LWilloughby	KFuller	GMiller			
/RA/	/RA/	/RA/			
6/23/11	6/27/11	6/27/11			

OFFICIAL RECORD COPY

T=Telephone


E=E-mail

F=Fax

Enclosure: Vehicle Incident Report, dated 05/27/2011

FAX REPORT TO OFFICE SHOWN ON BACK OF FORM

VEHICLE INCIDENT REPORT

FOR OFFICE USE ONLY — COMPANY REPRESENTATIVE TO COMPLETE ALL INFO PERTAINING TO OFFICE USE AND FAX REPORT TO HON. OFFICE (SEE BACK FOR INFO)			
Today's Date 05272011		Rental Agreement or Trip Ticket 571939341	
Vehicle Owner Name 01698	Vehicle Unit No. 9420696	Mileage 32837	
Driver's License Number	Driver's License State	Driver's License No. & State	DATE OF BIRTH OF COMPANY REPRESENTATIVE
<input type="checkbox"/> Check Item if employee accident and fill in the information to the right Work Location _____ Job Title _____			
CUSTOMER / DRIVER TO COMPLETE ALL INFORMATION BELOW			
Date & Time of Incident _____ Location of the Incident (City, State, Zip Code) _____			
Rental Information (Name of Driver, Rental Number, Phone Number) _____ Police Report Number _____			
Customer's Name (Last, First) William, Leonard		E Mail Leonard.William@OPPD.net	
Street Address _____		City, State / Province, Zip Code / Postal Code _____	
Customer's Phone No. 702-244-5725		Work _____ Home _____ Cell _____	
Name of Customer's Insurance & Policy No. _____		Insurance Phone No. _____	
Name of Customer's Employer & Address _____			
Driver of Rental Vehicle (Only if different from rental)	Driver's Name as it shows on the Driver's License _____		TYPE OF RENTAL BUSINESS _____ Pleasure _____
	Driver's Age _____		Position at Rental _____
	Street Address _____		No. of Occupants in Rental Vehicle _____
	City, State / Province, Zip Code / Postal Code _____		Telephone No. _____
Driver's License No. & State / Province _____		Name of Insurance Company & Agent _____ Tel No. _____ Policy No. _____	
Driver or Owner of Other Vehicle or Property	Name of Driver (Name, if different from license holder) _____		Telephone No. _____ Email _____
	Street Address _____		Driver's Name _____
	City, State / Province, Zip Code / Postal Code _____		City, State / Province, Zip Code / Postal Code _____
	Name of Insurance Co. & Agent _____		Policy No. _____
Name of Owner of Property _____		Address _____	
License Plate No. & State / Province _____		No. of Occupants in Vehicle _____	
Describe Damage to Vehicle (If Applicable) _____			
Persons Injured or Killed	Name and Street Address, City, State / Province, Zip Code / Postal Code _____		Telephone No. _____ Age _____ Sex _____
	Occupant's Veh. No. _____	Position _____	Position at Rental _____
Witnessing to Accident	Name & Street Address, City, State / Province, Zip Code / Postal Code _____		Tel. No. (Home) _____
DRIVER/CUSTOMER STATEMENT: EXPLAIN THE CAUSE OF DAMAGE:			
<input checked="" type="checkbox"/> Hit Damage			
Driver acknowledges that damage to the rental vehicle as indicated occurred during the customer's use of the vehicle. Driver further agrees to cooperate with HCM investigation of the incident.			
Is Rental Vehicle Damaged?		CUSTOMER / DRIVER SIGNATURE	
Yes _____ No _____	<input checked="" type="checkbox"/> Leonard William		
Current Location of Vehicle _____	BODY DAMAGE STATUS <input type="checkbox"/> Heavy <input type="checkbox"/> Light <input type="checkbox"/> Scratches <input type="checkbox"/> Undercarriage <input type="checkbox"/> Unknown <input type="checkbox"/> Other Explain _____		
If Towed, Towed Call No. _____	RENTAL DAMAGE AREA OF RENTAL VEHICLE (If Applicable) 		
DRIVER'S COPY 918 (12/00) ACCR			