

143149

FILED FOR RECORD
SKAMANIA COUNTY
BY *Skamania County*

DEC 10 10 26 AM '01

Laony
CLERK OF
GARY H. OLSON

SKAMANIA COUNTY CLAIM FOR DAMAGE FORM

CLAIMANT: THIS CLAIM MUST BE FILED WITH THE SKAMANIA COUNTY CLERK OF THE BOARD Skamania County Auditor's Office Skamania County Courthouse 240 North West Vancouver Avenue, Room 27 Stevenson, WA 98648	FOR OFFICE USE ONLY: CLAIM NO. _____ DATE FILED: _____ COPIES TO: _____ ATTACHMENTS: YES ☐ NO ☐
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- Name (including spouse if married): (Please Print)
Heidi Navell
- P.O. Box 1235 Carson WA 98610
 Address City State Zip
- HM Phone: 427-7337 WK Phone: 427-5653 MSSG Phone: 490-5399
- Date and time of incident: December 7, 2001 12:10p.m.
- Location of incident:
One half mile east of Stevenson on SR14
- Describe in narrative form and in detail exactly how the incident occurred:
A large object came out of the County
truck trailer and hit my car across
when the object hit the car it broke the
sunroof and damaged the roof, side panels,
door and trunk. Gas chips in car seat.
- What is the amount of damages claimed arising out of the following circumstances
(Include estimates and bills, if available): 1476.16 car seat 1000.00
Casco Alpha Omega Car Seat 4158.98

8. Please list name and address of any and all witnesses or persons involved:
(Please Print)

N/A

9. Describe the damages or injuries you sustained as a result of the incident:

large object damaged hood of car and broke sun
roof out. also damaging Trunk lid and both
side panels of car.

10. Was incident investigated by a police officer? Sheriff Yes State Patrol Yes
City Silverton

11. If a vehicle was involved in the incident, describe: Make Honda
Model Accord Year 2001 State WA License No. _____
Insurance Company Sage Co. Policy Number _____

12. Describe what you did after the incident occurred: I pulled the car
over, got turned around and caught up
with the vehicle the object came from.

13. Describe the conversations you had, if any, with County personnel during or after
the incident occurred. I just told him what had
happened and waited for an officer to
arrive.

14. How did you identify the County as the party responsible for your damage?
I saw the large flying object come from
the loader/dump truck.

I certify under penalty of perjury under the laws of the State of Washington that the
information contained in this claim is true and correct.

DATED THIS 7 DAY OF December 2001

Heidi Newell
Claimant's Signature

File Name: Commis/Risk Mng/Claims/Claim For Damages

NOTE: Personal property (car, etc.) damages are to be accompanied by 2 estimates for repair costs. The Skamania
County Risk Manager will investigate this claim. The decision to honor this claim will be based upon that investigation.
Making a false report or providing false evidence is a crime and punishable by fine and/or imprisonment. Additional
pages may be attached if needed to answer the questions.

962 Wind River Highway
P.O. Box 1020 • Carson, WA 98610
PHONE: DAYS (509) 427-8737

Greg H. Wyninger
(509) 427-8049/

Date 12/7/01

Name HEIDI NEWELL Address 12 EMERALD DR City CARSON Phone 427-8628
Make HONDA Year 2001 Serial No. _____ Body Style 111L SEL Style No. _____
Mileage 16000 License No. U Paint No. _____ Trim No. _____ Insurance Co. _____

PAUL
\$1476.66
PAUL

18.9 HRS. OF LABOR AT \$ 40.00 PER HR. \$ 756.00

PARTS \$390.06

PAINT MATERIALS \$734 00

SUB TOTAL \$ 1350 06

SALES TAX \$ 96.60

ESTIMATE TOTAL \$476 EE

ADVANCE CHARGES \$

GRAND TOTAL \$

\$_____ insurance deductible

This estimate is based on our inspection and does not cover additional parts or labor which may be required after the work has been started. After the work has started, worn or damaged parts which are not evident on that inspection may be discovered. Naturally this estimate cannot cover such contingencies. Plans please subject to change without notice. This estimate is for immediate acceptance.

By: _____ THIS WORK AUTHORIZED BY _____

[REDACTED]

REPORT NO. 1249864

CITY STREET: ☐ OTHER: ☐ COUNTY RD: ☐ PRIVATE WAY: ☐	AREA: ☐ REAR: ☐ STOLN: ☐ VEHICLE: ☐ HT & PLAN: ☐
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11-2-87 2001 120030 2039 N ☐ E ☒ IN ☐
S ☐ W ☐ CF ☒ 1250

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

STATE ROUTE 14 BLOCK NO. ☐ MILE POST ☒ 45.05

DISTANCE ☐ MILES ☒ FEET ☐ S ☐ W OF (PREFERENCE OR CROSS STREET)
 040 CATHOLIC CHURCH ROAD

DAMAGE THRESHOLD MET ☐ PHONE 804-427-8715

[illegible][illegible]

ALGAWDNZ7W 04-24-1973

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[illegible]

2001 FREIGHTMASTER CALIF 3DMP FORMED BY
 SHAWMUT #0257 ER 4770 STATION 500 CALIF 95664
 LIBRARY REFERENCE: NEW PANCE CO.

VEHICLE NO. 1
 SHADE IN DAMAGED AREA

REVIEW	☐	PRODUCTION COUNTIES RISK DOC	10/1/72
FILE	☐	CHRON 1	10/1/72
CHANGE THRESHOLD	☒	PHONE	

[illegible]

12 ENERBACT DRIVE PO BOX 12

[illegible]

NEWEL H J 210 P I W A F 10-21-1979

ON DUTY ☐ 2 4 1 1 NATURE OF INJURY

ZZ7MKE WA AHGKSL6S2IA057301

2801	HONDA	ACCURD	4DR	TORIED BY	VEHICLE NO. 2
------	-------	--------	-----	-----------	---------------

SUBMITTER'S NAME [REDACTED]		SUBMITTER'S ADDRESS [REDACTED]		SUBMITTER'S PHONE [REDACTED]	
SUBMITTER'S FAX [REDACTED]		SUBMITTER'S E-MAIL [REDACTED]		SUBMITTER'S SIGNATURE [REDACTED]	
SUBMITTER'S TITLE [REDACTED]		SUBMITTER'S ORGANIZATION [REDACTED]		SUBMITTER'S COUNTRY [REDACTED]	
SUBMITTER'S CITY [REDACTED]		SUBMITTER'S STATE [REDACTED]		SUBMITTER'S ZIP [REDACTED]	
SUBMITTER'S COUNTRY [REDACTED]		SUBMITTER'S COUNTRY [REDACTED]		SUBMITTER'S COUNTRY [REDACTED]	

1249864	CHARGE	OFFENSE (and priority)
WSP	805	DOOPER, NEIL HARVEY



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1301872

CORRECTION ☐

REPORT NO. 1247864



ADDRESS & PHONE 1	NATURE OF INJURY
ADDRESS & PHONE 2	NATURE OF INJURY
ADDRESS & PHONE 3	NATURE OF INJURY
ADDRESS & PHONE 4	NATURE OF INJURY
ADDRESS & PHONE 5	NATURE OF INJURY

SCENE NOT OBSERVED

INDICATE NORTH BY ARROW

VEHICLE #1 WAS W/B ON SR14. VEHICLE #1 IS A 3MTR DUMP TRUCK PULV. A 2001 TRAILER. SAME LOW BED TRAILER. A HINCH 930 RUMPT LOOPER WAS ON THE TRAILER. VEHICLE #2 WAS E/B ON SR14 AS VEHICLE #1 PASSED VEHICLE #2 A PIECE OF DEBRIS FROM VEHICLE #1 STRUCK VEHICLE #2 (27-11)

VEHICLE #1 WAS W/B ON SR14. VEHICLE #1 IS A 3MTR DUMP TRUCK PULV. A 2001 TRAILER. SAME LOW BED TRAILER. A HINCH 930 RUMPT LOOPER WAS ON THE TRAILER. VEHICLE #2 WAS E/B ON SR14 AS VEHICLE #1 PASSED VEHICLE #2 A PIECE OF DEBRIS FROM VEHICLE #1 STRUCK VEHICLE #2 (27-11)

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

REPORTING OFFICER'S SIGNATURE: [Signature] DATE: 05/08 UNIT OR DIST. DET: 12-06-01 PLACED SIGNED: CARSON

PART B 2000-040-100 8 (REV)

809 WAWS POLICE 1237 1247

PAGE 2 OF 2

12/07/01

Skamania County Sheriff's Department
State Link Messages:

Page: 938
1

Unread Msg(s) 0

Arrival: 15:29:11 12/07/01 Mag subj: L

Message Text:

DOL 809 SKC11.L.WA0300011.LIC/59512C

VIN/1FVMAV02PK03477

VYR/2002.VMA/FREIG.VMO/DUMP

EXP DATE/12-31-0000

SKAMANIA COUNTY E R AND R

PO BOX 790

STEVENSON, WA 98648

REGAL OWNER SAME AS ABOVE

TITLE/ 07-19-2001 0120034603

TAB# IS NOT AVAILABLE
PREV TAB NOT AVAILABLE
PLATE ISSUE DATE/ 07-2001

12/0

15:2

*218

12/0

15:2

12/07/01
15:28

Skamania County Sheriff's Department
State Link Messages:

Page: 938
1

Unread Msg(s) 0

Arrival: 15:28:17 12/07/01 Msg subj: L

Message Text:

DOL 809 SKC11.L.WA0300011.LIC/59513C

VIN/1TKC030361M057220

YR/2001.VMA/TRAIL.VMO/FLATBE

EXP DATE/12-31-0000

SKAMANIA COUNTY E R AND R

PO BOX 790

STEVENSON, WA, 98648

LEGAL OWNER SAME AS ABOVE

TITLE/ 07-20-2001 0120134001

TAB# IS NOT AVAILABLE
PREV TAB NOT AVAILABLE
PLATE ISSUE DATE/ 07-2001

#234

Skamania County Sheriff's Office



01-7228-01



01-7228-02



01-7228-03



01-7228-04



01-7228-05



01-7228-06



01-7228-07



01-7228-08



01-7228-09



01-7228-10



01-7228-11



01-7228-12



01-7228-13



01-7228-14



01-7228-15



01-7228-16

Photo Officer's Signature:

Print Date: 12/7/01