

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: 12/26/05

COPIES TO: _____

NO DAMAGES CAN BE PAID BY SKAMANIA COUNTY UNLESS THIS FORM IS COMPLETE. THIS PROVISION CANNOT BE WAIVED.

ATTACHMENTS: YES(☐) NO

1. Name (including spouse if married): (Please Print)

Randy L. Daggy

2. Sauve m. Daggy

Address _____ City _____ State _____ Zip _____

3. HM Phone: 425-8343 WK Phone: _____ ^{Cell} MSSG Phone: 509 263 0757

4. Date and time of incident: 12/26/05 around 10 AM.

5. Location of incident:

32 Alpine Lane

6. Describe in narrative form and in detail exactly how the incident occurred:

(Seeing wrong) My vehicle 1989 Isuzu PU was parked on my property in front of my home at 32 Alpine Ln. Carson. Shortly after the snow plow went by my home I went out to my vehicle to find that my drivers side mirror was broken and covered with the snow from the snow plow.

7. What is the amount of damages claimed arising out of the following circumstances (Include estimates and bills, if available):

Parts = 75.31
Labor = 48.00

(See attached)

Total 123.31

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

Samir m Daggy 32 Alpine Lane (Wife)
Randy S Daggy " " (Son)
(I took a picture with my cell phone)

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

No Injuries. Only damage was to the
drivers side mirror of my vehicle.

10. Was incident investigated by a police officer? Sheriff _____ State Patrol _____
City No

11. If a vehicle was involved in the incident, describe: Make N/A
Model _____ Year _____ State _____ License No. _____
Insurance Company _____ Policy Number _____

12. Describe what you did after the incident occurred: Took a picture
with my cell phone and called Skamania
County.

13. Describe the conversations you had, if any, with County personnel during or after the incident occurred. I called County Road Dept. and was
told to go to County Assessor office and get claim
forms. I then called the Assessor office and was told
they would send me the forms in the mail.

14. How did you identify the County as the party responsible for your damage?
The snow plow was a Skamania County
snow plow.

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 4 DAY OF January, 2006

[Signature]
Claimant's Signature

File Name: Commiss/Risk Mang/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.

12/30/2005 at 12:44 PM
43432

Job Number:

BRALEY & GRAHAM CO
Federal ID #:930767983
Portland's Red Carpet Auto Center
9155 S.W. CANYON ROAD
PORTLAND,, OR 97225
(503)595-3712 Fax: (503)595-3715

PRELIMINARY ESTIMATE

Written By: THEO SEALS
Adjuster:

Insured: RANDY DAGGY
Owner: RANDY DAGGY
Address: PO BOX 703
CARSON, WA 98610
Cellular: (509)263-0757

Claim #
Policy #
Deductible:
Date of Loss:
Type of Loss:
Point of Impact:

Inspect
Location:

Insurance
Company:

Days to Repair

1989 ISUZ LS 4X4 SPACECAB 4-2.6L-FI 2D P/U Int:

VIN:

Lic:

Prod Date:

Odometer:

Tilt Wheel	Intermittent Wipers	Dual Mirrors
Privacy Glass	Clear Coat Paint	Power Steering
Power Brakes	4 Wheel Disc Brakes	Cloth Seats
Bucket Seats	Recline/Lounge Seats	Rear Step Bumper
Aluminum/Alloy Wheels		

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		DOOR				
2*	Repl LT	Mirror bright	1	75.31	1.0	
Subtotals ==>				75.31	1.0	0.0

Parts	75.31
Body Labor	1.0 hrs @ \$ 48.00/hr 48.00
SUBTOTAL	\$ 123.31
GRAND TOTAL	\$ 123.31
ADJUSTMENTS:	
Deductible	0.00
CUSTOMER PAY	\$ 0.00
INSURANCE PAY	\$ 123.31

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Job Number:

PRELIMINARY ESTIMATE

1989 ISUZ LS 4X4 SPACECAB 4-2.6L-FI 2D P/U Int:

1) Oregon Law states that: "An insurer shall not require that a particular person make the repairs to the insured's motor vehicle as a condition for recovery by the insured under a motor vehicle liability insurance policy." ORS 746.280

Repairs to this vehicle may require specific welding equipment as recommended by the manufacturer. 2) This is only an estimate of repair cost. Additional damage may be discovered after teardown. Final cost of repairs may be higher or lower. Parts prices subject to change and will be billed per actual invoice. 3) Please be advised that chips, scratches, and/or other damage will remain in blended panels unless otherwise noted.

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide AEO4605 Database Date 11/2005, CCC Data Date 11/2005, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recon. Recored parts are described as Recore. NAGS Part Numbers and Prices are provided by National Auto Glass Specifications, Inc. Pound sign (#) items indicate manual entries. Some parts that are described as AM, Qual Repl Parts or Comp Repl Parts may be OE Surplus parts or other OE parts offered at a special pricing discount. For further clarification please review the Suppliers List attached to this estimate, or consult the appraiser or estimator. Some 2006 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The Pathways estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

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MC # 2006160278
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