# Kitites County Prosocuting Attornoy

GREGORY L. ZEMPEL

KITTITAS COUNTY COURTHOUSE 205 WEST FIFTH, ROOM 213 ELLENSBURG, WA 98926-3129 TELEPHONE: (509) 962-7520 FAX: (509) 962-7022 / SCAN: 962-7520

FAMILY SUPPORT DIVISION 507 NORTH PINE STREET, SUITE C ELLENSBURG, WA 98926-3129 TELEPHONE: (509) 962-7521 FAX. (509) 962-7016

RITTITAS COUNTS

April 20, 2010

CIVIL DIVISION 205 WEST FIFTH, ROOM 213 ELLENSBURG, WA 98926-3129 TELEPHONE: (509) 962-7664

PAX: (509) 962-7060 RECEIVED

**APR** 3 0 2010

KITTITAS COUNTY PROSECUTING ATTORNEY

04-29-10 11:08 RCVD

Kittitas County Sheriff's Office Public Safety Building 307 W. Umptanum Road Ellensburg WA 98926

Public Works 411 N. Ruby Street Ellensburg, WA 98926

Claim of Gregory and Laura Simons

Claim Number: 201004190002

## Greetings:

We have received the documentation on the above listed claim. If by chance, you did not receive this information, we have attached a copy for you. It appears that this claim relates to an incident involving your department. Please give us your input on the claim, what happened, and any records that you have relative to this matter.

If you have any questions, please give us a call.

NEIL A. CAULKINS
Deputy Prosecuting Attorney

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Enclosure as noted CC: BOCC, WSRP NAC/th

PROSECUTOR ACCOMMISSIONERS ACC

INSURANCE

04/19/2010 09:48:19 AM

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AUDITORS NOTE Portions of this

RECEIVED

APR 2 6 2010

KITTITAS COUNTY PROSECUTING ATTORNEY

### KITTITAS COUNTY CLAIM FOR DAMAGES

Return to: County Auditor 205 W 5<sup>th</sup> Ave, Suite 105 Ellensburg, WA 98926

#### Instructions:

Please read the entire form before completion. Fill out each question as completely as possible, to the best of your ability. Do not hesitate to use the back side of this form if you need more than the space provided. An incomplete response may delay the processing of your claim.

1.	Name (Including spouse, if married): Gregory D. Simons
	Laura L. Simons
2.	Phone (Home): (425-235-6059) (Work): (425-681-0319)
3.	Address (include former address if at present address for less than 6 months):
	8308 121 Ave SE Newcastle WA 98056 Physical
	Same Mailing
4.	Date of Incident: 4/2/2010
5.	Location of Incident: Interstate 90 east bound at exit 93 overpass
6.	Describe in detail the defect which caused the injury:
	Snow plow on overpass threw snow on to Interstate 90 hitting our vehicle

04/19/2010 09:48:19 AM \$0.00 Claims Against County/rls/misc Kittitas County Auditor **201004190002**Page 2 of 6 к со

7.	Describe in narrative form and in detail exactly how the incident occurred:
	Snow plow on overpass threw snow on to Interstate 90 hitting our vehicle
8.	Was claim investigated by a police officer? Yes
	Sheriff State Patrol Yes City Police
9.	Description of claimant's vehicle: Honda Make 2002 Year
	Model Odyssey License No. 371YRC
10.	Describe what you did after the accident occurred:
	Phoned 911 and reported incident
11.	Describe the conversations you had, if any, with County personnel during or after the incident occurred:  State Trooper Darren Wright spoke with County Supervisor Chuck Reed on the phone at
	se of the incident. Laura Simons spoke with Chuck Reed on the phone 4/6/10. He gave
	e phone number for the Auditors office and said that if we needed any help with our claim
10 Dies	ase give him a call.
12.	Describe the damages or injuries which you sustained as a result of the incident:  Shattered windshield
13.	What is the amount of damages claimed? (Include estimates and bills, if available): \$307.42 We were traveling to Richland. WA for Easter and had our windshield replaced
	elite on Saturday 4/3/10. I have enclosed a photocopy of the receipt and a copy of the
Collisi	on Exchange of Information form given to us by Trooper Darren Wright.

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14.	How did you identify the County as the party responsible for your damage?  State Trooper confirmed with Chuck Reed the presence of a vellow Kittitas County snow plow at reported location followed by a second snow plow with driver that
	witnessed incident.
15.	List the names and addresses of all witnesses to the incident:
16.	Are you covered by insurance? Yes If yes, who is your insurance agent/carrier?
	State Farm. Christine Hutton  14950 ALLEN Rd Suite A, Bellevue WA 98006.  425-643-6505
Dated	this <u>13</u> Day of <u>April</u> , 20 <u>10</u> .
	ann L. Simons
Signat	ure of Claimant
Subsci	ribed and sworn (affirmed) to before me this 13 <sup>m</sup> day of 1701, 2010.
	Seal On the seal
	DANIELLE M. BANNIER  STATE OF WASHINGTON  Notary Public in and for the State of Washington
	NOTARY PUBLIC Residing at Residing
	MY COMMISSION EXPIRES  08-02-11  BECL