

KITTITAS COUNTY DEPARTMENT OF PUBLIC WORKS

Mark R. Cook, PE Director

August 11, 2017

Mr. Christopher Horner
Deputy Prosecuting Attorney
205 West Fifth, Room 213
Ellensburg, WA 98926-3129

RE: Claim No.: 201707250047

Dear Mr. Horner:

Public Works has reviewed the claim for damage (Exhibit 1) submitted by Ms. Andrea Eklund. We confirm that Public Works was engaged in road operations at or near the referenced area on the time identified in the claim for damages (201707250047). Our maintenance crew applied bituminous surface treatment (chip seal) on Vantage Highway during the period of time consistent with the date identified in the claim for damages.

Windshield damage, resulting from following too closely during chip seal application or shortly after application, is not uncommon. Public Works posts advisory speed signs (25 MPH) during all chip seal operations encouraging drivers to proceed at a prudent speed for the conditions. Many drivers fail to follow our advisory speed when driving through our maintenance operation.

The claim states the driver was traveling on Vantage Highway when a piece of gravel came out from the car in front of her damaging her windshield. While Ms. Eklund states in her claim that she was approximately six car lengths behind the lead vehicle, it appears that was insufficient distance to avoid being struck by the piece of gravel. I recommend that the claim for damages be denied by the Board of County Commissioners.

Respectfully,

Mark R. Cook
Director

Attachments: Exhibit 1 Claim No. 201707250047

C: Lisa Young, Risk Manager

Exhibit 1: Claim No. 201707250047

PROSECUTOR GZ
COMMISSIONERS JK
DEPARTMENT MO
INSURANCE JP

07/25/2017 04:44:40 PM

201707250047

\$0.00
Claims Against County/ris/misc
Kittitas County Auditor

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KCPR05



KITTITAS COUNTY CLAIM FOR DAMAGES

Return to:

County Auditor

205 W 5th Ave, Suite 105

Ellensburg, WA 98926

509-962-7504

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):

Andrea Eklund (Heath Eklund Spouse)

2. Phone (Home): (—) ^{Cell} (Work): (253-347-9273)

3. Address (include former address if at present address for less than 6 months):

331 Hazel Lane Ellensburg, WA 98926

Physical

Same

Mailing

4. Date of Birth: 6-10-77

5. Date and Time of Incident:

July 21st 9:35am

6. Location of Incident:

Vantage Hwy ~ .25 mile west of
Nanewm Rd, heading East

7. Describe in detail the defect which caused the injury:

Vantage has been recently chip sealed &
gravel chipped front window

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

Driving East on Vantage Hwy and \pm .25 miles
west of Naneum a piece of gravel from the chip
seal earlier in the week came out from the
car in front of me (approx 6 car lengths ahead) and
chipped my front drivers side car window. Note it was a
chip, by the end of the day on 7/21 it spread to a crack.

9. List the names of all persons involved and contact information, if known.

myself only.

10. Was claim investigated by a police officer? NO

Sheriff _____ State Patrol _____ City Police _____

11. Description of claimant's vehicle: Subaru Make Impreza Year 2014

Model: Impreza License No. ARP 3457

12. Describe what you did after the accident occurred:

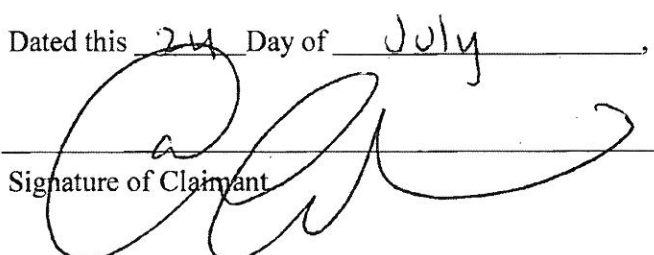
Drove home, assessed the window and called
Public Works. Spoke to Grayle who advised the form location

13. Describe the conversations you had, if any, with County personnel during or after the incident occurred:

See question 12.

14. Describe the damages or injuries which you sustained as a result of the incident:
ding in drivers side front window that
spread to a crack
15. What is the amount of damages claimed? (Include estimates and bills, if available):
\$1626.61 (see attached)
16. How did you identify the County as the party responsible for your damage?
The county is doing the chip sealing
17. List the names and addresses of all witnesses to the incident:
n/a
18. Are you covered by insurance? Yes If yes, who is your insurance agent/carrier?
State farm

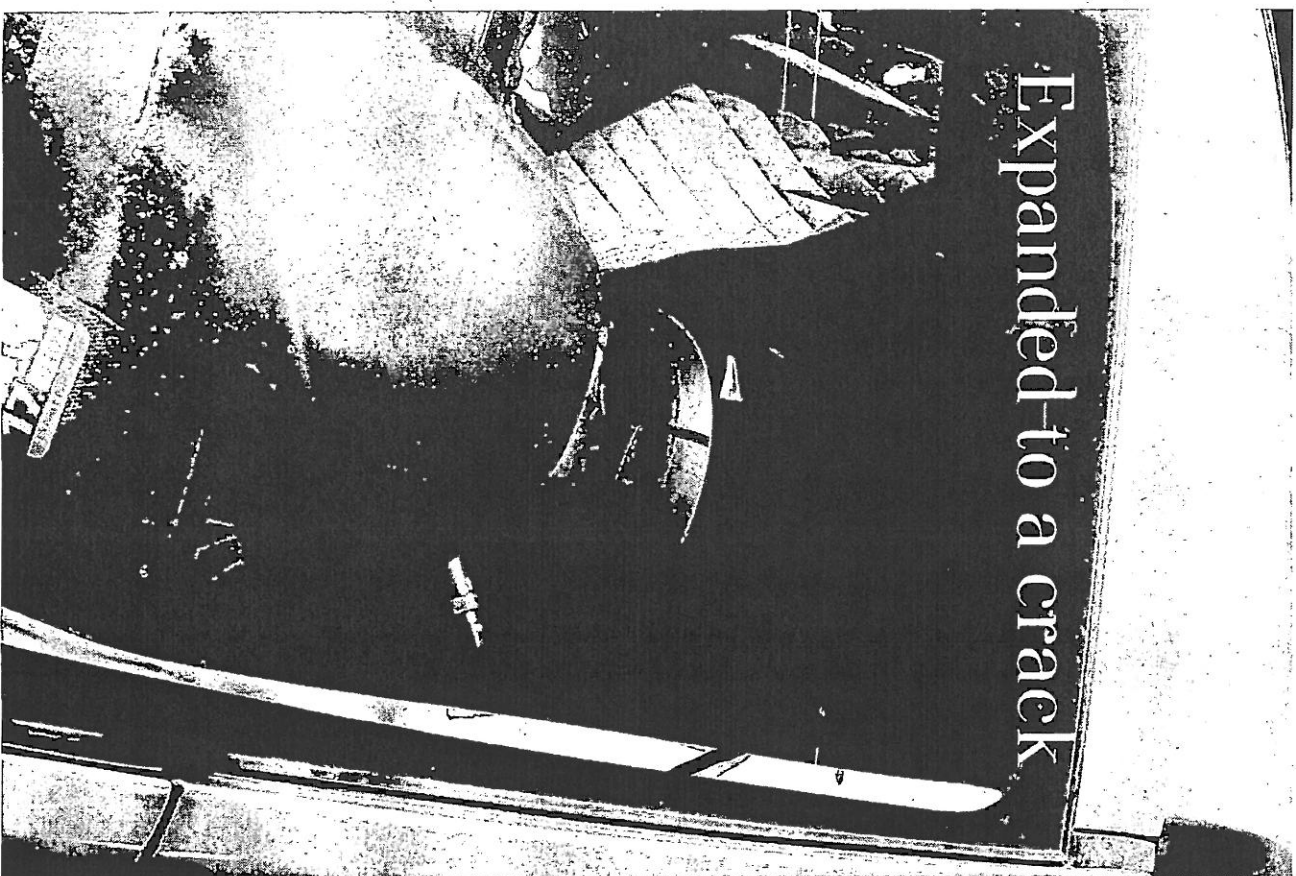
Dated this 24 Day of July, 2017.

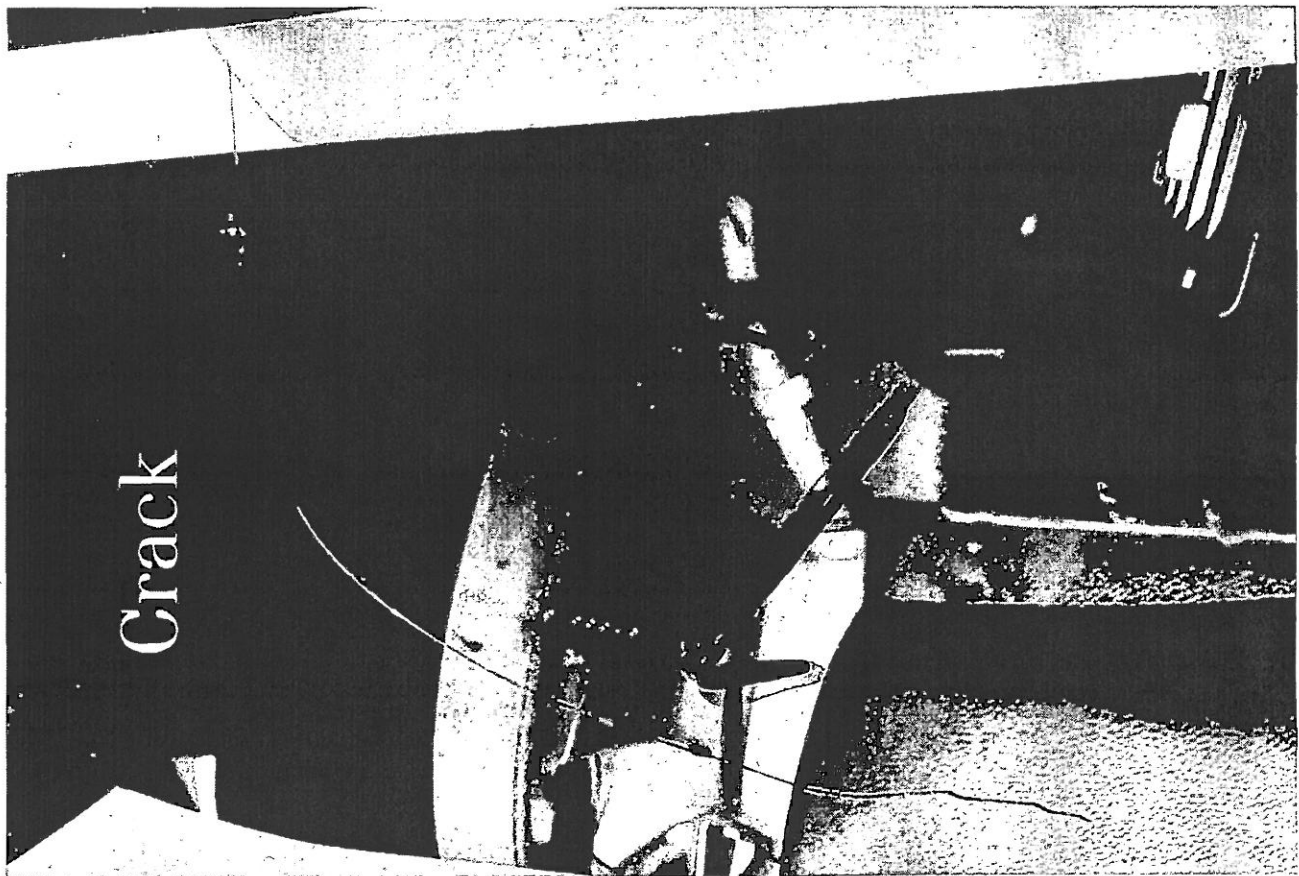

Signature of Claimant

Subscribed and sworn (affirmed) to before me this _____ day of _____, 20____.

Seal

Notary Public in and for the State of Washington
Residing at _____





PH:509-925-3777 FAX:509-925-5500

Federal Tax ID: 45-2549779

P/O#:	Cust State Tax ID:	Quote: Q003391 Date: 7/25/2017 Time: 04:33 PM
Taken By:	Cust Fed Tax ID:	
Installer:	Ship Via:	
SalesRep:	Adv. Code:	
Bill To: MISC		Sold To: MISC
ANDREA EKLUND ELLENSBURG, WA 98926		ANDREA EKLUND ELLENSBURG, WA 98926

253-347-9273

Vehicle Information

Make: Subaru		Model Style: Impreza 4 Door Hatchback		Year: 2014		
Odometer:		VIN:		License:		
Qty	Part Number	Description	List	Disc%	Sell	Total
1	FW03565GBNNPPG	Windshield-(Heated Wiper Park Area,W/Third Visor F	\$501.45	20	\$401.16	\$401.16
1	100F	100 flat (Flat Rate) (2.9 Hours)	\$100.00	0	\$100.00	\$100.00
1	HAH000004	Adhesive-(2.0,Urethane,Dam,Primer)	\$30.00	0	\$30.00	\$30.00
1	WFS F3564	Moulding	\$47.96	0	\$47.96	\$47.96

Sub Total: \$579.12

Tax: \$47.49

Total: \$626.61